SOUTH DAKOTA YOUTH RISK BEHAVIOR SURVEY REPORT 2003

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Acknowledgements

South Dakota is one of only a handful of states that have been able to secure weighted data for every year the Youth Risk Behavior Survey (YRBS) has been conducted. This achievement could only have been accomplished with the continued commitment of our state's school administrators, school principals, teachers, parents, and students. Sincere appreciation is extended to those school districts that have participated in past and present surveys.

We acknowledge the cooperation of the Bureau of Indian Affairs (BIA) for administering the 2003 YRBS survey in South Dakota BIA and tribal schools, and for granting us permission to incorporate some of the BIA YRBS data into the statewide results.

Special thanks are extended to Dr. Rick Melmer, Secretary of the South Dakota Department of Education, the South Dakota Board of Education and Betty Oldenkamp, Secretary of the South Dakota Department of Human Services for their continued support of this survey.

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Description of the Youth Risk Behavior Survey

The Youth Risk Behavior Survey (YRBS) is a questionnaire that assesses the six priority health-risk behaviors that result in the greatest amount of morbidity, mortality, and social problems among youth. The YRBS was developed cooperatively by the Centers for Disease Control and Prevention (CDC), and state and local departments of education. The six priority health-risk behaviors assessed in the YRBS are behaviors that result in intentional and unintentional injuries; tobacco use; alcohol and other drug use; sexual behaviors that result in HIV infection, other sexually transmitted diseases (STDs), and unintended pregnancy; dietary behaviors; and physical activity.

These six priority health-risk behaviors were selected for inclusion in the survey because, among persons aged 10-24 years, 70.6% of all deaths are due to only four causes: motor vehicle crashes (31.4%), other unintentional injuries (12%), homicide (15.3%), and suicide (11.9%). In addition, each year an estimated 1 million teenaged girls become pregnant and an estimated 3 million cases of sexually transmitted diseases occur among the same age group. A limited number of behaviors usually established during youth contribute substantially to these causes of mortality and morbidity. These behaviors include carrying a weapon, physical fighting, attempted suicide, drinking or using drugs while operating a motor vehicle, lack of seatbelt use while riding in a motor vehicle, lack of helmet use while riding a bicycle or motorcycle, and unprotected sexual intercourse that results in unintended pregnancies and sexually-transmitted diseases, including HIV infection.

Among adults aged 25 and over in the U.S., 64.6% of deaths are due to only two causes: cardiovascular disease (41%) and cancer (23.6%). A limited number of behaviors, often established during youth, contribute to these health problems, which generally do not result in mortality and morbidity until adulthood. These behaviors include the use of tobacco, unhealthy dietary practices, and physical inactivity.

Description of the Sample Selection Process

All regular public, private, and Bureau of Indian Affairs (BIA) schools in South Dakota containing any students in grades 9, 10, 11, or 12 were eligible to be selected for inclusion in the sample. Ungraded and out-of-school programs were excluded. Schools were stratified on the basis of type of control (public, private, BIA), region (East River, West River), and size of enrollment. Systematic sampling with probabilities proportional to size of enrollment with a random start was used to select 25 schools to participate in the survey.

Each participating school submitted a list of all classes with students in grades 9, 10, 11, or 12 which met during a given class period (e.g., 2nd period). Systematic equal probability sampling with a random start was used to select classes to participate in the survey.

Description of the Survey Administration in the Classroom

Prior to the administration of the survey, a letter was mailed to the parents of the students in each of the selected classes, which informed them about the nature of the survey. The letter also contained a form that the parents could return to request that their child not participate in the survey. The instructions read to the students and printed on the survey stated that completing the survey is voluntary, and even though their parents had given permission for them to do the survey, they could make their own decision at that time as to whether or not to participate.

Description of the Strategies to Ensure the Privacy of Responses

The survey administration process was designed to maximize the confidentiality of each student's responses. Two strategies were utilized to achieve the greatest possible privacy for the students' responses. The first strategy consisted of distributing three versions of the questionnaire in each classroom. Each version had a different ordering of the questions. Therefore, even if someone was to see another person's responses, the onlooker would not know which questions were being answered. The second strategy for ensuring privacy consisted of having the students seal their sense-mark answer sheets into a standard-size business envelope, and then having them seal the questionnaire and the sealed business envelope into a large manila envelope.

Results

Characteristics of the Sample

Completed surveys were received from 20 of the 25 sampled schools for a school response rate of 80%. Usable questionnaires were received from 1,829 of the 2,257 sampled students for a student response rate of 81%. The overall response rate was (80% * 81%) = 65%.

The sample was comprised of 49% female students and 51% male students. The grade level breakdown of the sample was 26% ninth grade students, 26% tenth grade students, 25% eleventh grade students, and 23% twelfth grade students. The race/ethnicity breakdown of the sample was 86% White, 12% Native American, and 2% other, i.e., Hispanic, Black or African American, Asian or Pacific Islander.

Weighting of the Responses

A weighting procedure was performed to reduce bias by compensating for differing patterns of nonresponse and to reflect the likelihood of sampling each student. The weighted results contained in this report can be used to make inferences concerning the priority health-risk behaviors of all high school students in grades 9 through 12 in public, private, and BIA schools in South Dakota.

Organization of this Report

The following six pages provide a summary of each of the six priority health-risk behaviors. The remainder of the report provides the summary results for each of the survey questions, along with the rationale for each question. In addition to reporting the overall results for each question, a separate breakdown is provided for grade level. Since the majority of the 2003 questions were also included in the 1997, 1999, and 2001 surveys, the results are also summarized by year.

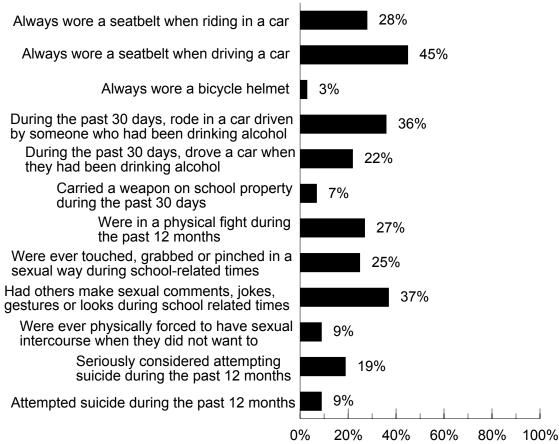
Summary of Behaviors that Result in Intentional and Unintentional Injuries and Violence

The chart below summarizes the reported risk behaviors that result in intentional and unintentional injuries and violence, and the reported instances of sexual harassment. Twenty-eight percent of the respondents always wore a seatbelt when riding in a car. Forty-five percent of the respondents always wore a seatbelt when driving a car. Only 3% of the respondents always used a helmet when riding a bicycle. Thirty-six percent of the respondents, during the past 30 days, rode in an automobile that was driven by someone who had been drinking alcohol. During the past 30 days, 22% of the respondents had driven an automobile when they had been drinking alcohol.

Seven percent of the respondents had carried a weapon on school property during the past 30 days. Twenty-seven percent of the respondents reported that they had been in a physical fight during the past 12 months. Twenty-five percent of the respondents were ever touched, grabbed, or pinched in a sexual way without their consent during school-related times. Thirty-seven percent of the respondents had others make unwanted sexual comments, jokes, gestures or looks during school-related times. Nine percent of respondents have been physically forced to have sexual intercourse when they didn't want to. Suicide was seriously considered by 19% of the respondents during the past 12 months. Nine percent of the respondents reported actually attempting suicide during the past 12 months.

Behaviors that Result in Intentional and Unintentional Injuries and Violence

Percentage of Respondents Who:



Summary of Tobacco Use

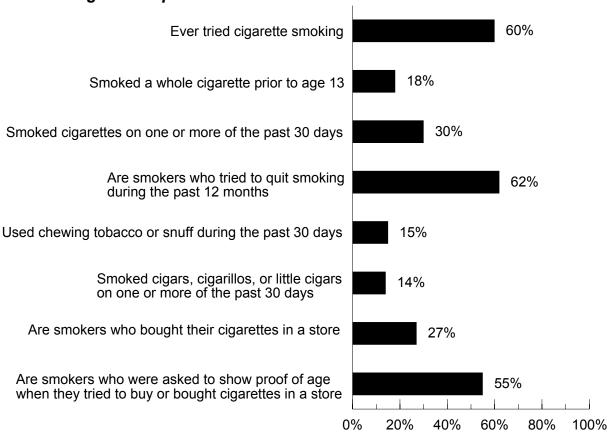
The reported risk behaviors associated with tobacco use are summarized in the chart below. Sixty percent of the respondents have tried cigarette smoking. Eighteen percent of the respondents had smoked a whole cigarette prior to age 13. Thirty percent of the respondents smoked a cigarette during the past 30 days. Sixty-two percent of the respondents who have smoked during the past 12 months reported that they have tried to guit smoking.

Fifteen percent of the respondents reported using smokeless tobacco, i.e., chewing tobacco or snuff, during the past 30 days. Fourteen percent of the respondents smoked cigars, cigarillos, or little cigars during the past 30 days.

Of respondents who smoked cigarettes during the past 30 days, 27% usually bought their cigarettes in a store. Of respondents who purchased cigarettes in a store during the past 30 days, 55% were asked to show proof of age.

Tobacco Use

Percentage of Respondents Who:



Summary of Alcohol and Other Drug Use

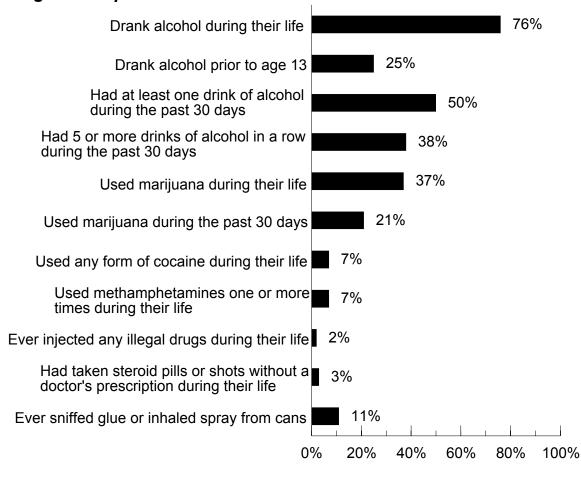
The chart below summarizes the reported risk behaviors associated with the use of alcohol and other drugs. Lifetime alcohol use was reported by 76% of the respondents. Twenty-five percent of the respondents had drank alcohol prior to age 13. One half of the respondents (50%) reported having at least one alcoholic drink during the past 30 days. Thirty-eight percent of the respondents had 5 or more alcoholic drinks in a row during the past 30 days.

Marijuana was used at least once by 37% of the respondents. Twenty-one percent of the respondents used marijuana during the past 30 days.

Cocaine use was reported by 7% of the respondents. Seven percent of the respondents reported using methamphetamines. Illegal drugs were injected by 2% of the respondents. Three percent of the respondents reported using steroid pills or shots without a doctor's prescription. Eleven percent of the respondents sniffed glue or inhaled sprays from cans during their lifetime.

Alcohol and Other Drug Use

Percentage of Respondents Who:



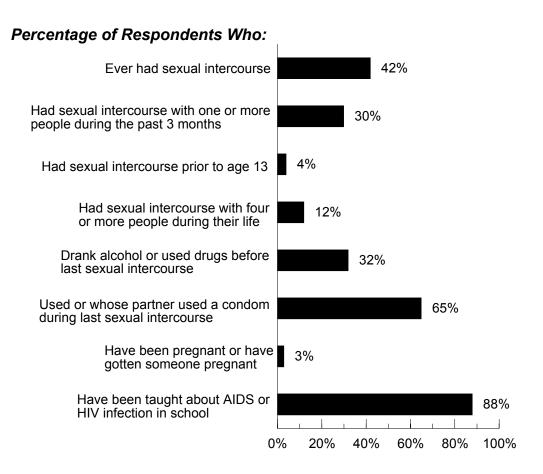
Summary of Sexual Behaviors that Result in HIV Infection, Other Sexually Transmitted Diseases, and Unintended Pregnancy

The chart below summarizes the reported sexual risk behaviors. Forty-two percent of the respondents reported having had sexual intercourse. Thirty percent of the respondents reported having had sexual intercourse with one or more people during the past three months. Four percent of the respondents reported having had sexual intercourse prior to age 13. Twelve percent of the respondents reported having had sexual intercourse with four or more people during their life.

Of the respondents who reported having had sexual intercourse, 32% used alcohol or other drugs prior to last sexual intercourse, and 65% reported condom use during last sexual intercourse. Three percent of the respondents reported that they had become pregnant or had gotten someone pregnant.

Eighty-eight percent of the respondents reported having been taught about AIDS or HIV infection in school.

Sexual Behaviors that Result in HIV Infection, Other Sexually Transmitted Diseases, and Unintended Pregnancies



Summary of Dietary Behaviors

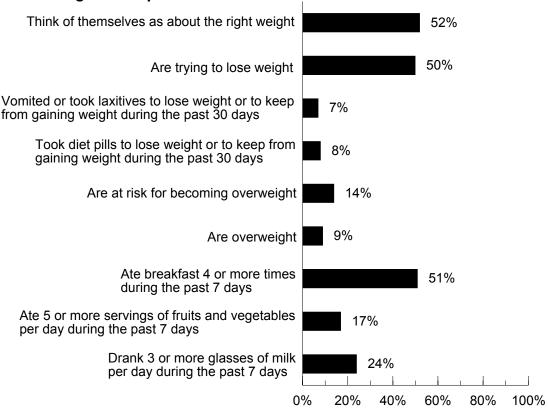
The reported risk behaviors associated with dietary intake are summarized in the chart below. Fifty-two percent of the respondents reported that they were the right weight. Fifty percent reported that they were trying to lose weight. Seven percent of the respondents had vomited or took laxatives to lose weight or to keep from gaining weight during the past 30 days. Eight percent of the respondents took diet pills to lose weight or to keep from gaining weight during the past 30 days.

Based on their reported height and weight measurements, 14% of the students are at risk for becoming overweight, and 9% are overweight.

Fifty-one percent of the respondents had eaten breakfast 4 or more times during the past 7 days. Seventeen percent of the respondents had eaten five or more servings of fruits and vegetables per day during the past 7 days. Twenty-four percent of the respondents had drank 3 or more glasses of milk per day during the past 7 days.

Dietary Behaviors





Summary of Physical Activity

The chart below summarizes the reported risk behaviors associated with physical inactivity. Regarding the amount of physical activity in which they engaged, 62% of the respondents exercised or participated in physical activities for at least 20 minutes that made them sweat and breathe hard on 3 or more of the past 7 days. Forty-nine percent of the respondents reported that they participated in exercises to strengthen or tone their muscles on 3 or more of the past 7 days. Twenty-six percent of the respondents participated in physical activities that did not make them sweat and breathe hard for at least 30 minutes on 5 or more of the past 7 days.

Twenty-seven percent of the respondents had at least one day of physical education class per week at school. Among those respondents who attended physical education classes, 86% reported spending more than 20 minutes actually exercising or playing sports during an average physical education class.

Participation on sports teams during the past 12 months was reported by 65% of the respondents. Nine percent of the respondents participated in no vigorous or moderate physical activity during the past 7 days.

On an average school day, 28% of the respondents watched 3 or more hours of television per day. Fourteen percent of the respondents played video games or used a computer for fun for 3 or more hours per day on an average school day.

Physical Activity

Percentage of Respondents Who:

Exercised or participated in physical activities for at least 20 minutes that made them sweat and breathe hard on 3 or more of the past 7 days

Did exercises to strengthen or tone their muscles during 3 or more of the past 7 days

Participated in physical activities that did not make them sweat and breathe hard for at least 30 minutes on 5 or more of the past 7 days

Go to physical education class 1 or more days in an average school week

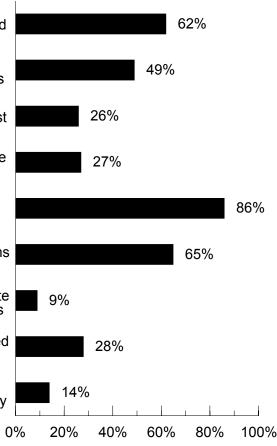
Of those who go to physical education class 1 or more days in an average school week actually spend more than 20 minutes exercising or playing sports during an average physical education class

Played on one or more sports teams during the past 12 months

Participated in no vigorous or moderate physical activity during the past 7 days

On an average school day watched TV for 3 or more hours per day

On an average school day played video games or used a computer for fun for 3 or more hours per day



Behaviors that Result in Intentional and Unintentional Injuries

Question:

8. When you rode a bicycle during the past 12 months, how often did you wear a helmet?

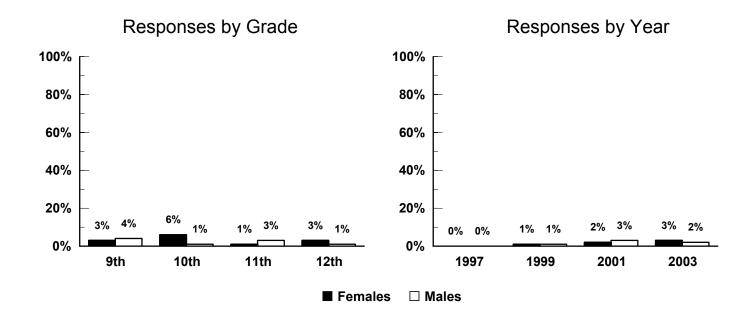
Rationale:

This question measures the frequency of helmet use while riding bicycles. Head injury is the leading cause of death in bicycle crashes.^{2,3} Bicycle helmets might prevent approximately 56% of bicycle related deaths.⁴ Proper use of bicycle helmets can eliminate 65%-88% of bicycle-related brain injuries and 65% of serious (i.e., facial fractures and lacerations seen in the emergency department) injuries to the upper and middle regions of the face.⁵⁻⁷ In 2001, 65.1% of high school students reported riding a bicycle in the previous 12 months, while 84.7% of those students reported never or rarely wearing a bicycle helmet.¹

Results:

Question 8

Of respondents who rode a bicycle during the past twelve months, the percentage who always wore a helmet = 3%



Behaviors that Result in Intentional and Unintentional Injuries

Questions:

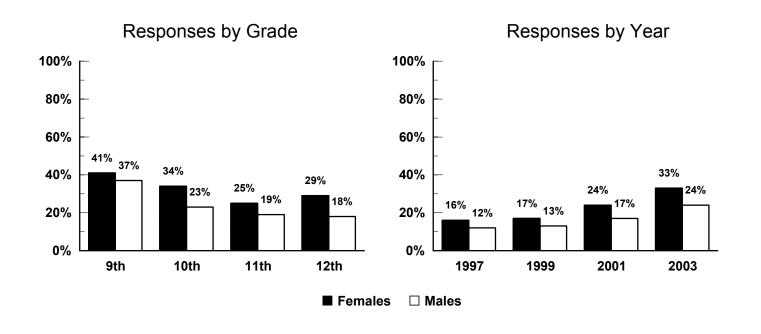
- 9. How often do you wear a seat belt when riding in a car driven by someone else?
- **10.** How often do you wear a seat belt when driving a car?

Rationale:

These questions measure the frequency with which students wear seat belts when driving or riding in a car. Proper use of lap and shoulder belts could prevent approximately 60% of deaths to motor-vehicle occupants. Motor-vehicle related injuries kill more young adults aged 15-19 years than any other single cause in the United States. In 2001, 14.1% of high school students reported rarely or never wearing a seat belt while riding in a car driven by someone else.

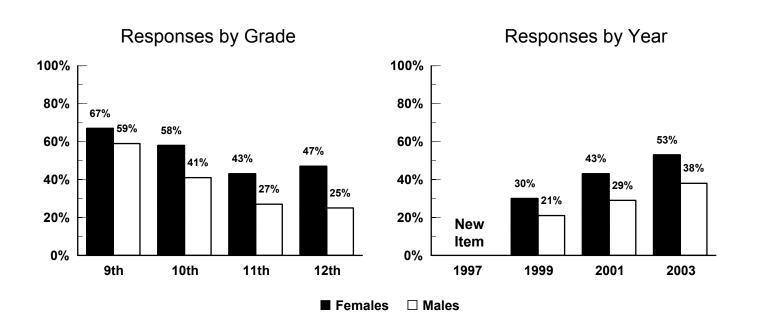
Results: The results for Questions 9 and 10 are summarized on page 14.

Percentage of respondents who always wore a seatbelt when riding in a car driven by someone else = 28%



Question 10

Of respondents who drove a car, the percentage who always wore a seatbelt = 45%



Behaviors that Result in Intentional and Unintentional Injuries

Questions:

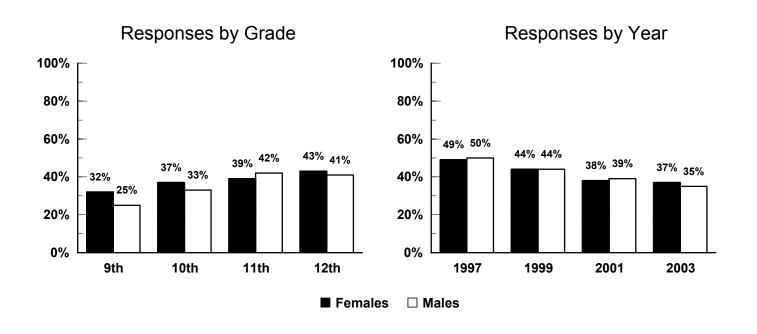
- **11.** During the past 30 days, how many times did you ride in a car or other vehicle driven by someone who had been drinking alcohol?
- **12.** During the past 30 days, how many times did you drive a car or other vehicle when you had been drinking alcohol?

Rationale:

These questions measure the frequency with which high school students drive a motor vehicle while under the influence of drugs or alcohol or ride as a passenger in a motor vehicle operated by someone who is under the influence of alcohol or drugs. Approximately 30% of all motor vehicle crashes that result in injury involve alcohol. Alcohol use is associated with 36% of motor-vehicle related fatalities among those aged 15-20 years and 20% of fatalities among those less than 15 years old. In 2001, 13.3% of high school students nationwide reported having driven a vehicle one or more times after drinking alcohol in the past 30 days and 30.7% of high school students reported riding on one or more occasions in the past 30 days in a car with a driver who had been drinking alcohol.

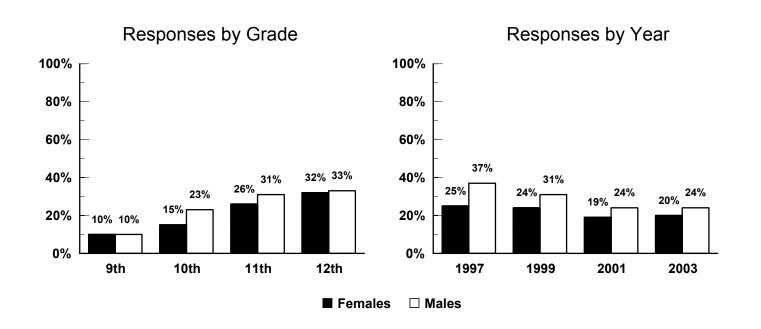
Results: The results for Questions 11 and 12 are summarized on page 16.

Percentage of respondents who during the past 30 days rode one or more times in a car or other vehicle driven by someone who had been drinking alcohol = 36%



Question 12

Percentage of respondents who during the past 30 days drove a car or other vehicle one or more times when they had been drinking alcohol = 22%



Behaviors that Result in Intentional and Unintentional Injuries

Questions:

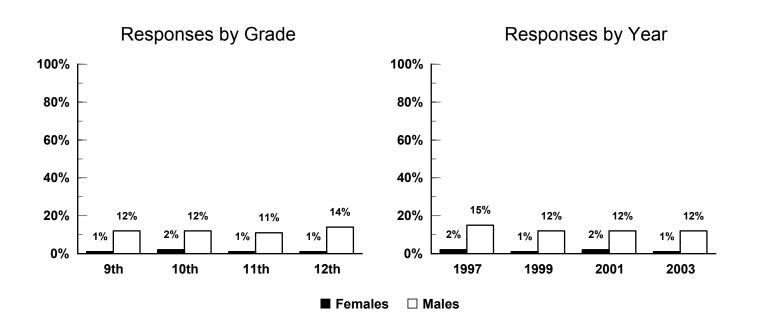
- **13.** During the past 30 days, on how many days did you carry a weapon such as a gun, knife, or club on school property?
- **14.** During the past 30 days, on how many days did you carry a gun on school property?
- **15.** During the past 30 days, on how many days did you not go to school because you felt you would be unsafe at school or on your way to or from school?
- **16.** During the past 12 months, how many times has someone threatened or injured you with a weapon such as a gun, knife, or club on school property?
- **17.** During the past 12 months, how many times has someone stolen or deliberately damaged your property such as your car, clothing, or books on school property?

Rationale:

These questions measure violence-related behaviors and school-related violent behaviors. Approximately 9 out of 10 homicide victims in the United States are killed with a weapon, such as a gun, knife, or club. Homicide is the second leading cause of death among all youth aged 15-19 years (10.6 per 100,000) and is the leading cause of death among black youth aged 15-19 years (37.2 per 100,000). Homicide rates increase substantially from 1.3 per 100,000 in youth aged 10-14 years to 10.6 per 100,000 in youth aged 15-19 years. Firearms markedly elevate the severity of the health consequences of violent behavior. In 1998, 82% of homicide victims 15 to 19 years old were killed with firearms. In 2001, 5.7% of high school students reported carrying a gun. In 1999, about 1.6 million thefts of student property occurred at school. Nearly 100% of school districts have a policy prohibiting weapon possession or use by high school students. A significant decrease in weapon carrying (e.g. a gun, knife, or club) among high school students on school property from 1993 to 2001 (11.8%-6.4%) occurred. In 2001, 6.6% of high school students felt unsafe at school or traveling to or from school.

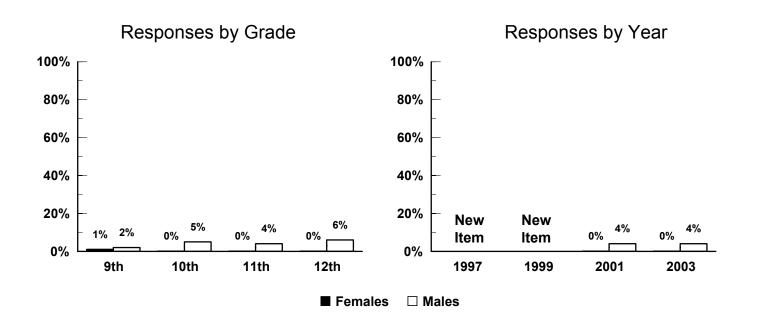
Results: The results for Questions 13 - 17 are summarized on pages 18 - 20.

Percentage of respondents who carried a weapon such as a gun, knife, or club on school property on one or more of the past 30 days = 7%

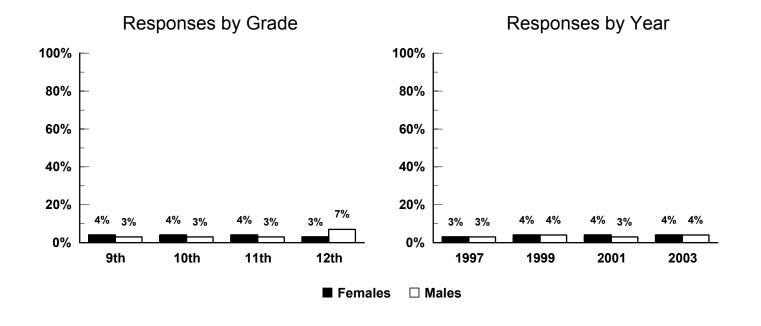


Question 14

Percentage of respondents who carried a gun on school property on one or more of the past 30 days = 2%

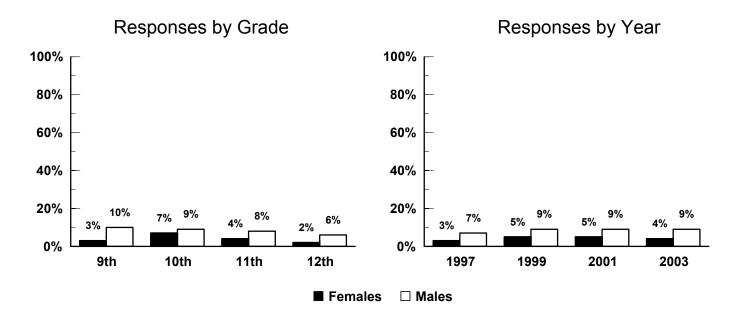


Percentage of respondents who did not go to school on one or more of the past 30 days because they felt they would be unsafe at school or on their way to or from school = 4%

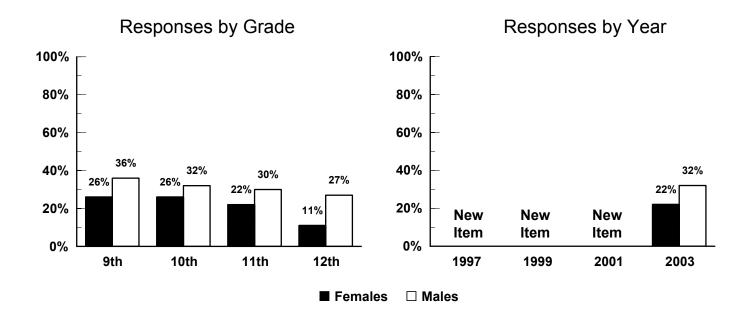


Question 16

Percentage of respondents who have been threatened or injured with a weapon such as a gun, knife, or club on school property one or more times during the past 12 months = 6%



Percentage of respondents who had property, such as their car, clothing, or books, stolen or deliberately damaged on school property one or more times during the past 12 months = 27%



Behaviors that Result in Intentional and Unintentional Injuries

Questions:

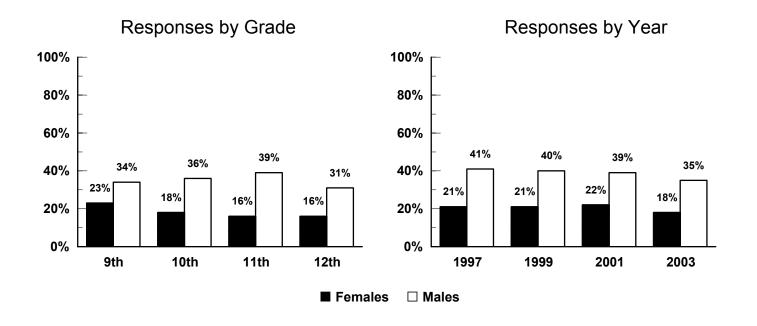
- **18.** During the past 12 months, how many times were you in a physical fight?
- **19.** During the past 12 months, how many times were you in a physical fight in which you were injured and had to be treated by a doctor or nurse?
- **20.** During the past 12 months, how many times were you in a physical fight on school property?
- **21.** During the past 12 months, did your boyfriend or girlfriend ever hit, slap, or physically hurt you on purpose?
- **22.** During the past 12 months, how many times have you felt threatened or been injured as a result of gang activity?
- **23.** Have you ever been physically forced to have sexual intercourse when you did not want to?
- **24.** During your whole school life, has anyone (this includes students, teachers, other school employees, and anyone else) ever touched, grabbed or pinched you in a sexual way when you did not want them to?
- **25.** During your whole school life, has anyone (this includes students, teachers, other school employees, and anyone else) ever made sexual comments, jokes, gestures, or looks when you did not want them to?

Rationale:

These questions measure the frequency and severity of physical fights, school-related fights, and abusive behavior. Physical fighting is an antecedent for many fatal and nonfatal injuries.¹⁷ During 1999, students aged 12-18 years were victims of 880,000 nonfatal violent crimes at school.¹⁵ In 2001, 33.2% of high school students reported that they had been in a physical fight anywhere and 12.5% had been in a physical fight on school property.¹ Forced sexual intercourse has been associated with increased risk of chronic diseases and other health problems.¹⁸ In 2001, 9.5% of high school students had been hit, slapped, or physically hurt on purpose by their boyfriend or girlfriend on one or more occasions in the past year, and 7.7% of high school students ever experienced forced sex.¹

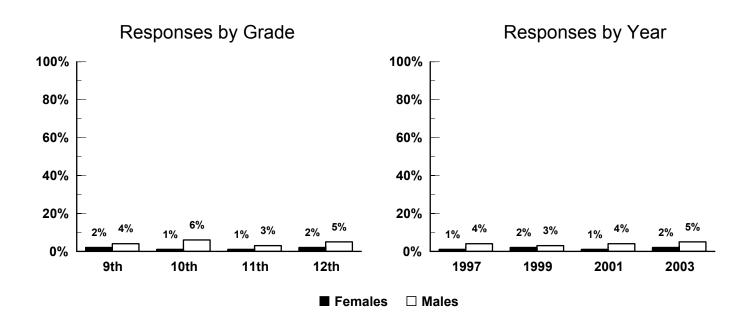
Results: The results for Questions 18 - 25 are summarized on pages 22 - 25.

Percentage of respondents who were in a physical fight one or more times during the past 12 months = 27%

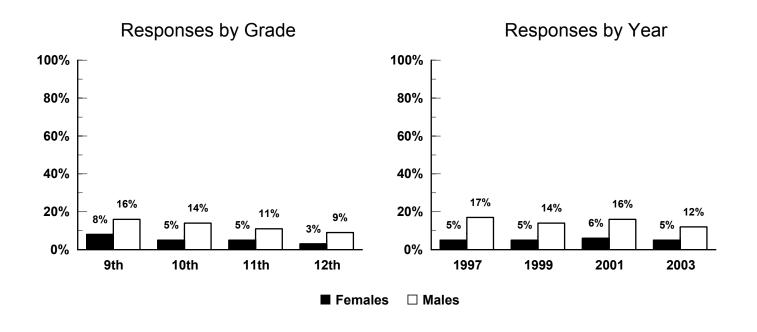


Question 19

Percentage of respondents who were injured in a physical fight and had to be treated by a doctor or nurse one or more times during the past 12 months = 3%

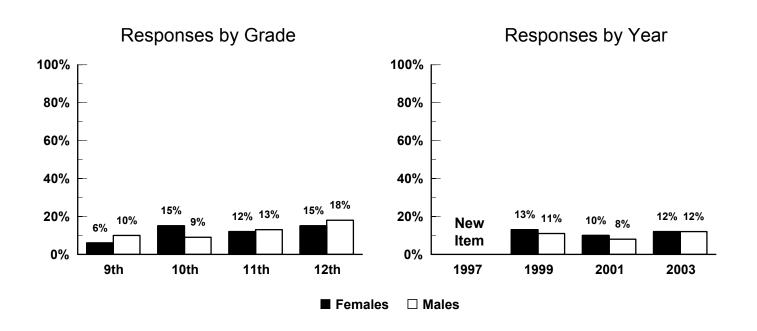


Percentage of respondents who were in a physical fight on school property one or more times during the past 12 months = 9%

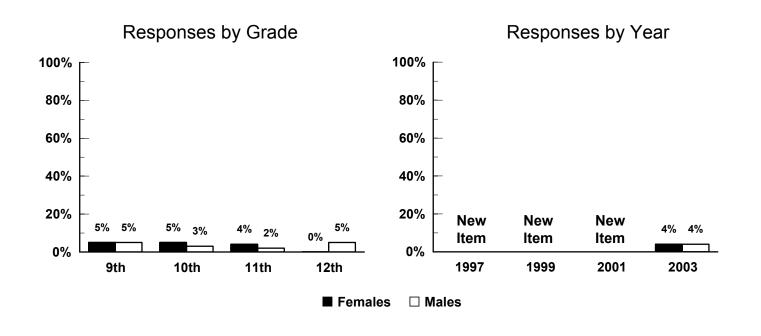


Question 21

Percentage of respondents who during the past 12 months were ever hit, slapped, or physically hurt on purpose by their boyfriend or girlfriend = 12%

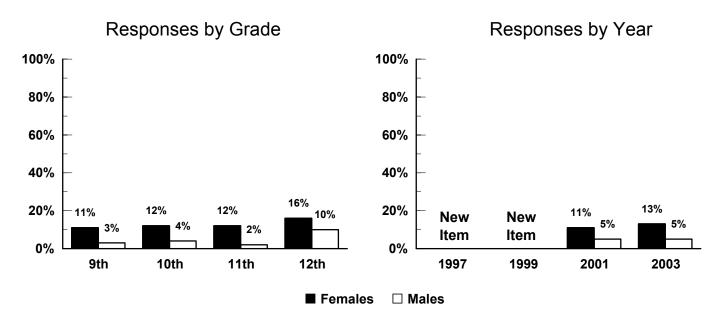


Percentage of respondents who felt threatened or were injured as a result of gang activity one or more times during the past 12 months = 4%



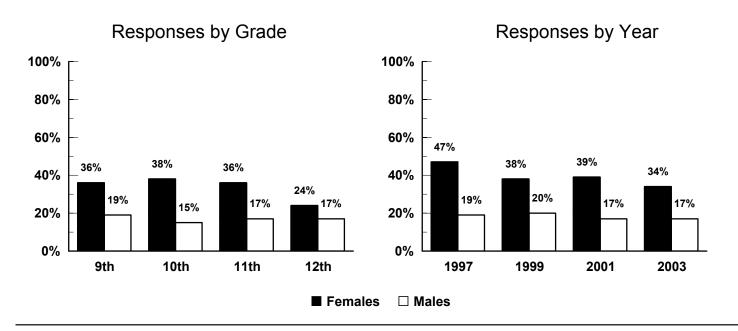
Question 23

Percentage of respondents who were ever physically forced to have sexual intercourse when they did not want to = 9%



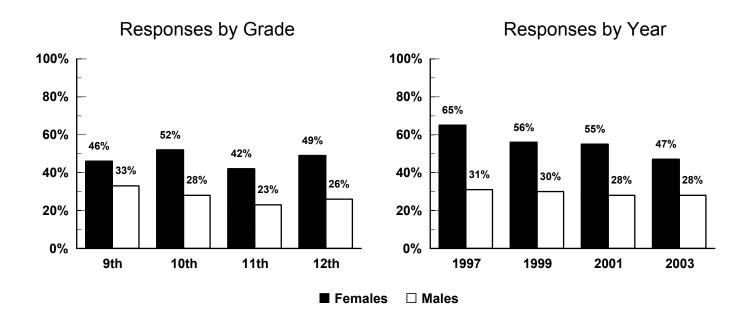
Question 24

Percentage of respondents who, during their whole school life, had been touched, grabbed, or pinched in a sexual way by anyone when they didn't want them to = 25%



Question 25

Percentage of respondents who, during their whole school life, had anyone make sexual comments, jokes, gestures, or looks when they did not want them to = 37%



Behaviors that Result in Intentional and Unintentional Injuries

Questions:

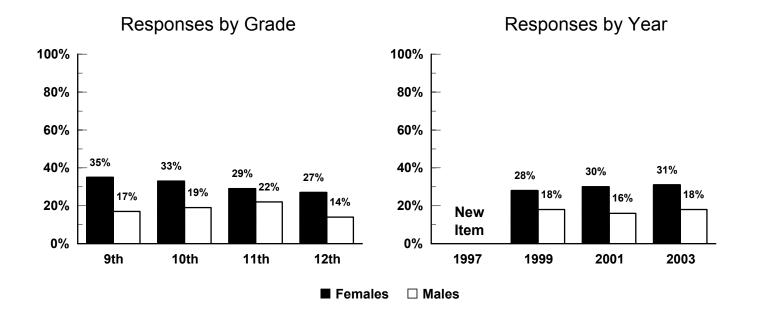
- **26.** During the past 12 months, did you ever feel so sad or hopeless almost every day for two weeks or more in a row that you stopped doing some usual activities?
- 27. During the past 12 months, did you ever seriously consider attempting suicide?
- **28.** During the past 12 months, did you make a plan about how you would attempt suicide?
- 29. During the past 12 months, how many times did you actually attempt suicide?
- **30.** If you attempted suicide during the past 12 months, did any attempt result in an injury, poisoning, or overdose that had to be treated by a doctor or nurse?
- **31.** Suppose a friend wanted help for suicidal thoughts. Who would you recommend first?
- **32.** The last time you saw a doctor or nurse, did they discuss ways to deal with feelings of hopelessness or sadness?

Rationale:

These questions measure sadness, suicide ideation, attempted suicides, and the seriousness of those attempts. Suicide is the third leading cause of death among youth aged 15-19. The suicide rate for persons aged 15-19 was 8.2 per 100,000 in 1999 down from a high of 11.0 per 100,000 in 1994. In 2001, 14.8% of high school students had made a specific plan to attempt suicide and 8.8% had attempted suicide one or more times in the past year. From 1991 to 2001, the percentage of high school students who seriously considered suicide decreased from 29% to 19%.

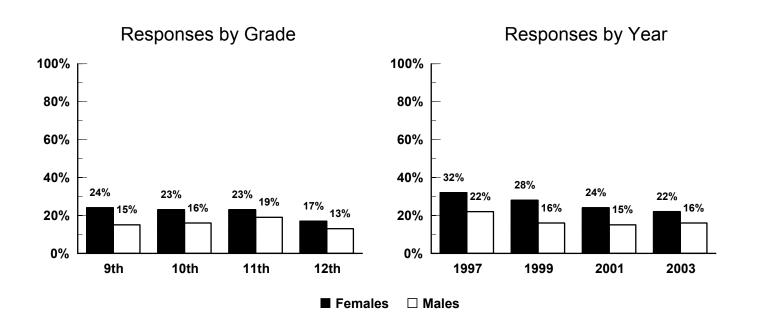
Results: The results for Questions 26 - 32 are summarized on pages 27 - 30.

Percentage of respondents who during the past 12 months felt so sad or hopeless almost every day for two weeks or more in a row that they stopped doing some usual activities = 25%

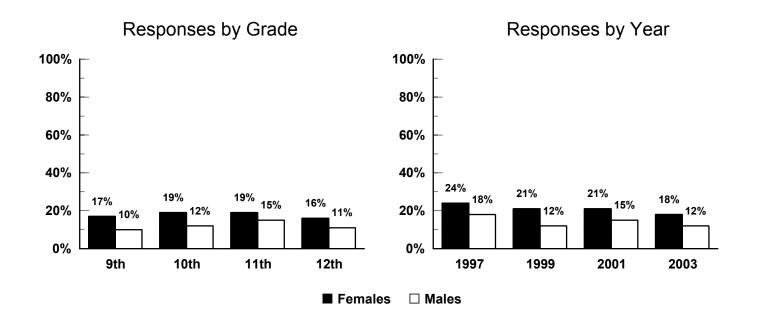


Question 27

Percentage of respondents who ever seriously considered attempting suicide during the past 12 months = 19%

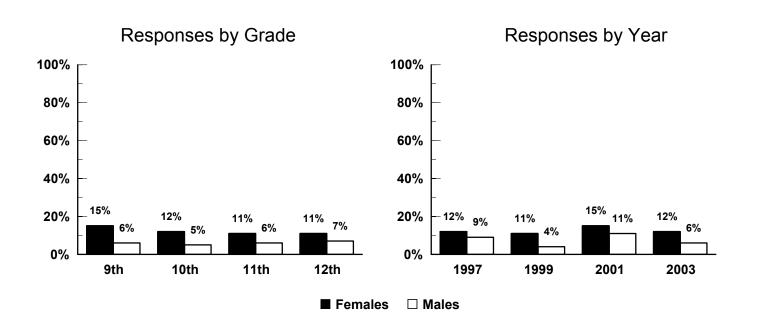


Percentage of respondents who made a plan about how they would attempt suicide during the past 12 months = 15%

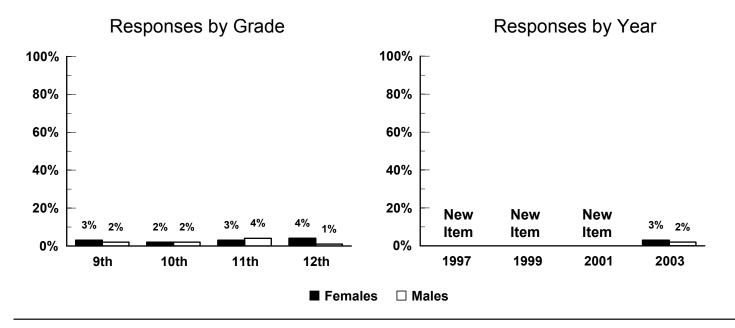


Question 29

Percentage of respondents who actually attempted suicide one or more times during the past 12 months = 9%

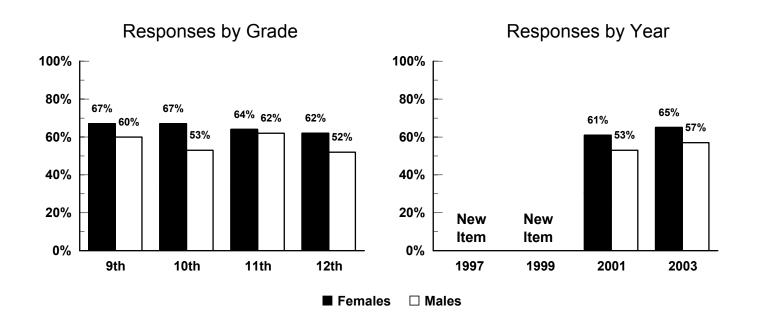


Percentage of respondents whose attempted suicide during the past 12 months resulted in an injury, poisoning, or overdose that had to be treated by a doctor or nurse = 3%

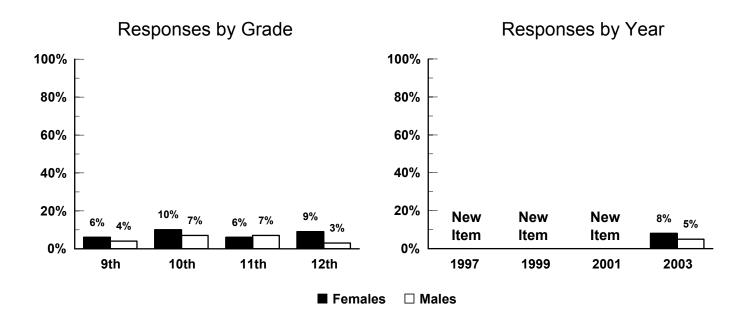


Question 31

Percentage of respondents who would first recommend a school counselor, school nurse, school social worker or family, friends, peer helpers to a friend who wanted help with suicidal thoughts = 61%



Percentage of respondents whose doctor or nurse discussed ways to deal with feelings of hopelessness or sadness the last time they saw them = 7%



Tobacco Use

Questions:

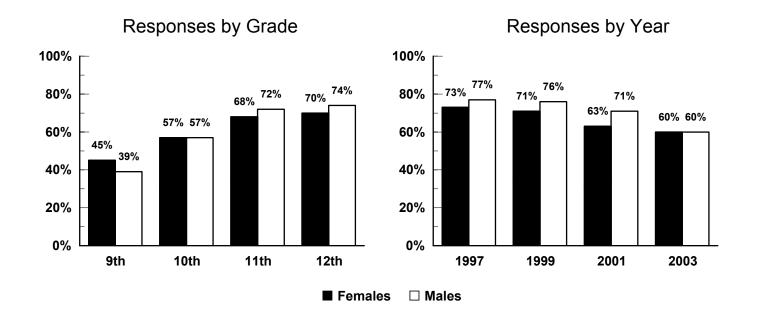
- **33.** Have you ever tried cigarette smoking, even one or two puffs?
- **34.** How old were you when you smoked a whole cigarette for the first time?
- **35.** During the past 30 days, on how many days did you smoke cigarettes?
- **36.** During the past 30 days, on the days you smoked, how many cigarettes did you smoke per day?
- **37.** During the past 30 days, how did you usually get your own cigarettes?
- **38.** When you bought cigarettes in a store during the past 30 days, were you ever asked to show proof of age?
- **39.** During the past 30 days, on how many days did you smoke cigarettes on school property?
- **40.** Have you ever smoked cigarettes daily, that is, at least one cigarette every day for 30 days?
- **41.** During the past 12 months, did you ever try to quit smoking cigarettes?

Rationale:

These questions measure lifetime and current smoking patterns, age of initiation, access to cigarettes, smoking on school property, and attempts to guit smoking. Tobacco use is considered the chief preventable cause of death in the United States with approximately one fifth of all deaths attributable to tobacco use. 19 Cigarette smoking is responsible for heart disease; cancers of the lung, larynx, mouth, esophagus, and bladder; stroke; and chronic obstructive pulmonary disease. 19 In addition, cigarette smokers are more likely to drink alcohol and use marijuana and cocaine as compared to nonsmokers.²⁰ If current patterns of smoking behavior persist, an estimated 5 million United States persons who were under the age of 18 in 1995 could die prematurely from smoking-related illnesses. 21 In 2001, despite laws prohibiting the sale of tobacco to minors in all states and the District of Columbia, 19.1% of high school students who were less than 18 years of age and who were current smokers reported that they usually bought cigarettes in a store or gas station in the past 30 days and, of those, 67.2% were not asked to show proof of age when buying cigarettes.¹ Approximately 46% of school districts in the United State prohibit tobacco use in buildings, on all school property, in school vehicles, and during school events on or off campus.²² In 2001, 9.9% of high school students reported smoking cigarettes in the last month on school property. The percentage of high school students who ever smoked cigarettes was steady from 1991-1999 and then decreased from 1999-2001. Current cigarette use among high school students increased from 1991 (27.5%) to 1997 (36.4%) and then decreased by 2001 to 28.5%.¹

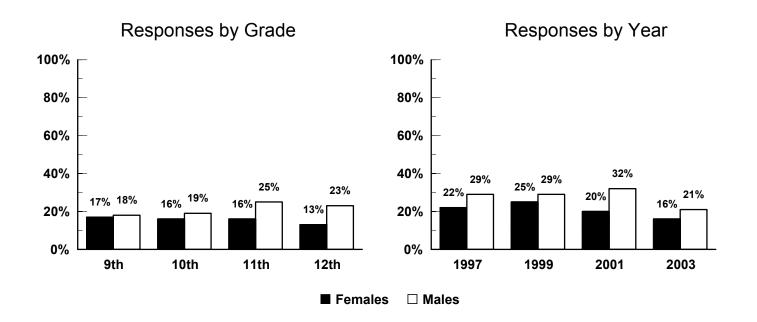
Results: The results for Questions 33 - 41 are summarized on pages 32 - 36.

Percentage of respondents who ever tried cigarette smoking, even one or two puffs = 60%

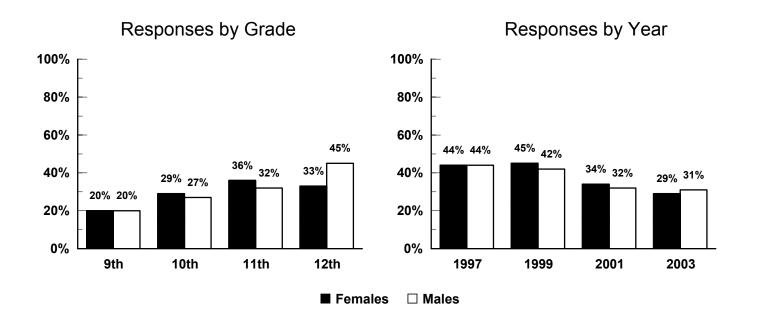


Question 34

Percentage of respondents who smoked a whole cigarette for the first time prior to age 13 = 18%



Percentage of respondents who smoked cigarettes on one or more of the past 30 days = 30%

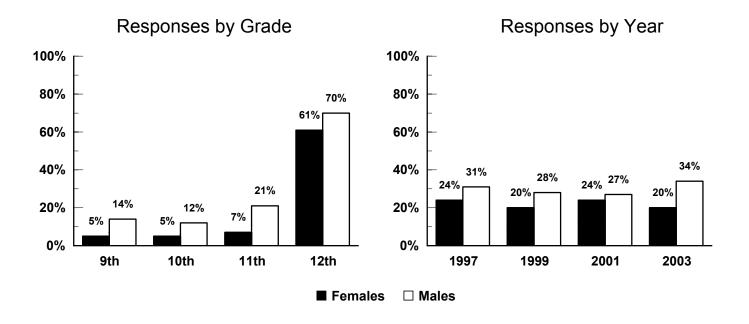


Question 36

Percentage of respondents who smoked 2 or more cigarettes per day on the days they smoked = 20%

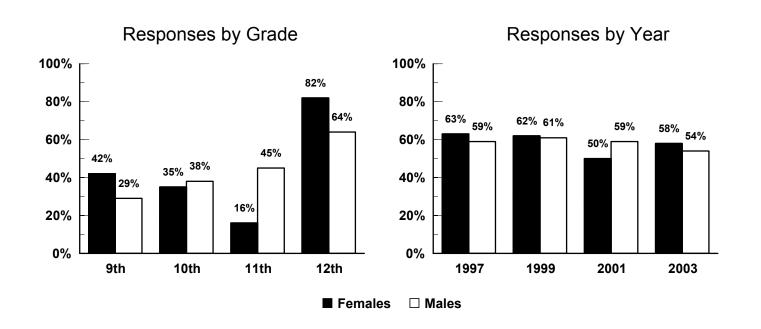


Of respondents who smoked cigarettes during the past 30 days, the percentage who bought their own cigarettes in a store such as a convenience store, supermarket, discount store, or gas station = 27%

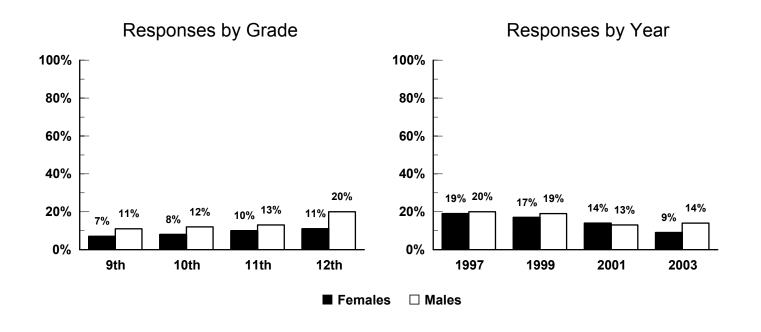


Question 38

Of respondents who bought cigarettes in a store during the past 30 days, the percentage who were ever asked to show proof of age = 55%

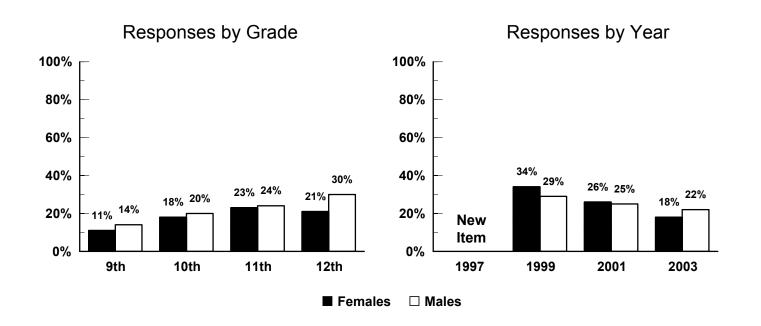


Percentage of respondents who smoked cigarettes on school property on one or more of the past 30 days = 12%

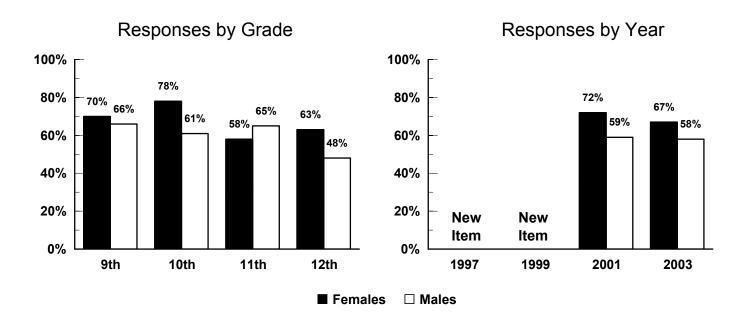


Question 40

Percentage of respondents who ever smoked cigarettes daily, that is, at least one cigarette every day for 30 days = 20%



Of respondents who smoked cigarettes during the past 12 months, the percentage who ever tried to quit smoking during the past 12 months = 62%



Tobacco Use

Questions:

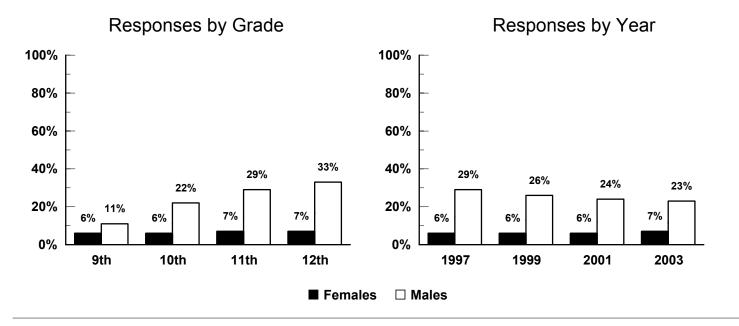
- **42.** During the past 30 days, on how many days did you use chewing tobacco or snuff, such as Redman, Levi Garrett, Beechnut, Skoal, Skoal Bandits, or Copenhagen?
- **43.** During the past 30 days, on how many days did you use chewing tobacco or snuff on school property?
- **44.** During the past 30 days, on how many days did you smoke cigars, cigarillos, or little cigars?

Rationale:

These questions measure smokeless tobacco use, smokeless tobacco use on school property, and cigar use. Smokeless tobacco use primarily begins in early adolescence. Approximately 75% of oral cavity and pharyngeal cancers are attributed to the use of smoked and smokeless tobacco. In 2001, 14.8% of male high school students were current smokeless tobacco users and 9.4% of male high school students reported current smokeless tobacco use on school property. Cigar smoking also has been associated with cancers of the oral cavity, larynx, esophagus, and lung. In 2001, the prevalence of cigar use in the past month was 22.1% among male high school students and 8.5% among female high school students.

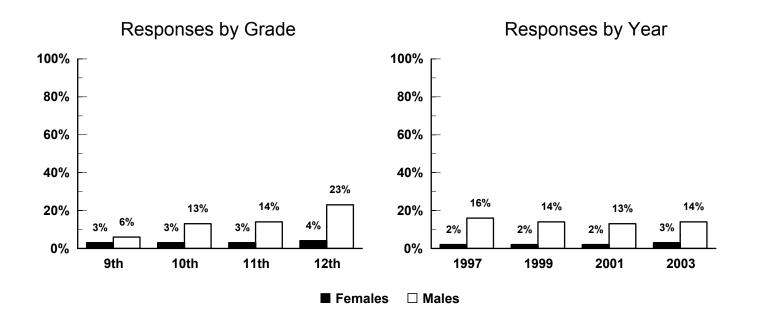
Results: The results for Questions 42 - 44 are summarized on pages 38 and 39.

Percentage of respondents who used chewing tobacco or snuff such as Redman, Levi Garrett, Beechnut, Skoal, Skoal Bandits, or Copenhagen, during the past 30 days = 15%

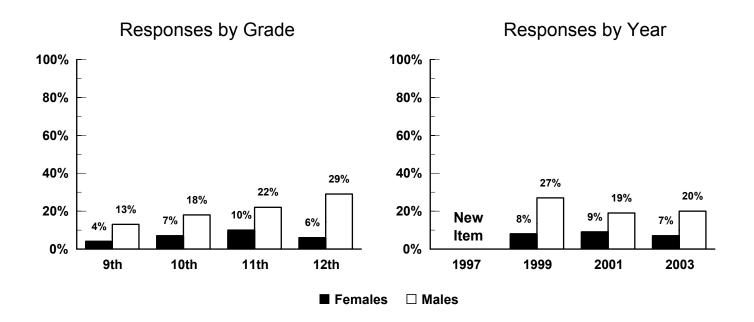


Question 43

Percentage of respondents who used chewing tobacco or snuff on school property on one or more of the past 30 days = 9%



Percentage of respondents who smoked cigars, cigarillos, or little cigars on one or more of the past 30 days = 14%



Alcohol and Other Drug Use

Questions:

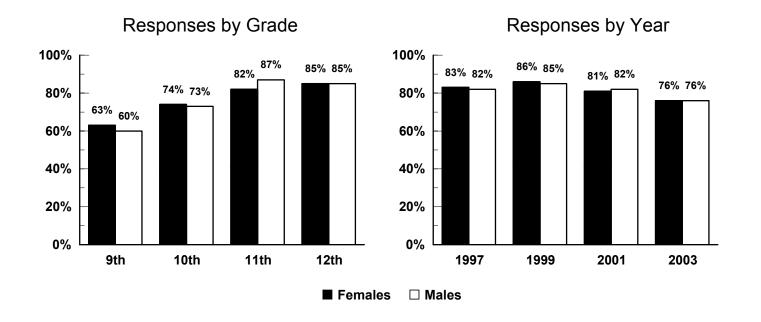
- **45.** During your life, on how many days have you had at least one drink of alcohol?
- **46.** How old were you when you had your first drink of alcohol other than a few sips?
- **47.** During the past 30 days, on how many days did you have at least one drink of alcohol?
- **48.** During the past 30 days, on how many days did you have 5 or more drinks of alcohol in a row, that is, within a couple of hours?
- **49.** During the past 30 days, on how many days did you have at least one drink of alcohol on school property?
- **50.** The last time you saw a doctor or nurse, did they discuss ways to avoid alcohol use?

Rationale:

These questions measure lifetime and current use of alcohol, age of initiation, episodic heavy drinking, and drinking on school property. Approximately 30% of all motor vehicle crashes that result in injury involve alcohol, and motor vehicle crashes are the leading cause of death among youth aged 15-19 in the United States. Heavy drinking among youth also has been linked to increased number of sexual partners, use of marijuana, and poor academic performance. In 2001, 78.2% of high school students had one or more drinks of alcohol in their lifetime, 47.1% had one or more drinks of alcohol in the past 30 days, and 29.9% had 5 or more drinks of alcohol on one or more occasions during the past 30 days.

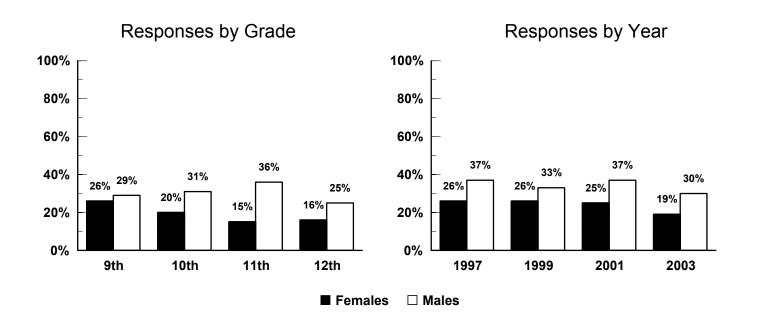
Results: The results for Questions 45 - 50 are summarized on pages 41 - 43.

Percentage of respondents who had at least one drink of alcohol on one or more days during their life = 76%

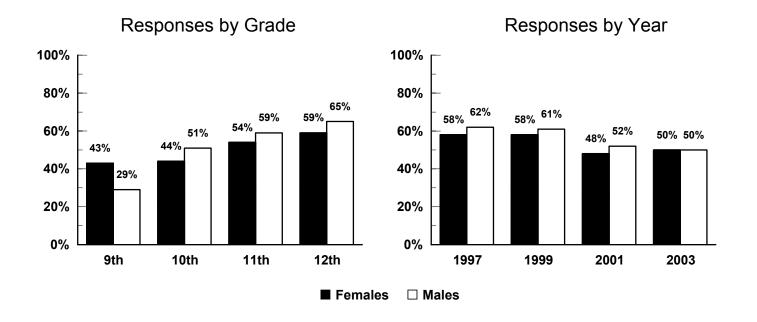


Question 46

Percentage of respondents who had their first drink of alcohol other than a few sips prior to age 13 = 25%

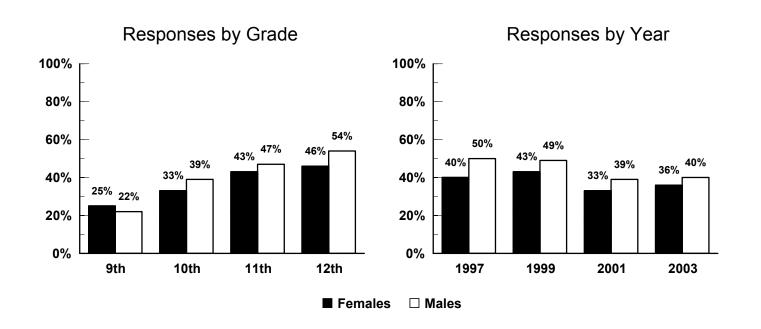


Percentage of respondents who had at least one drink of alcohol on one or more of the past 30 days = 50%

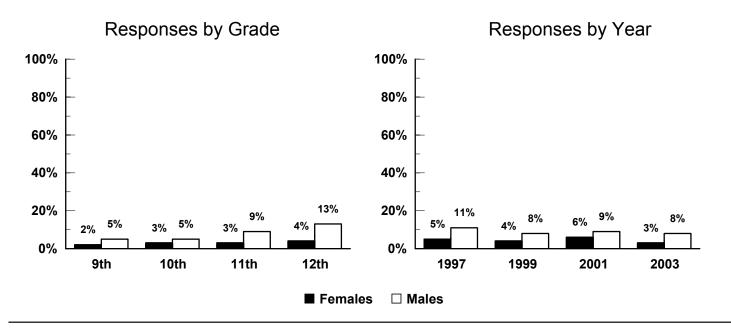


Question 48

Percentage of respondents who had 5 or more drinks of alcohol in a row, that is, within a couple of hours, on one or more of the past 30 days = 38%

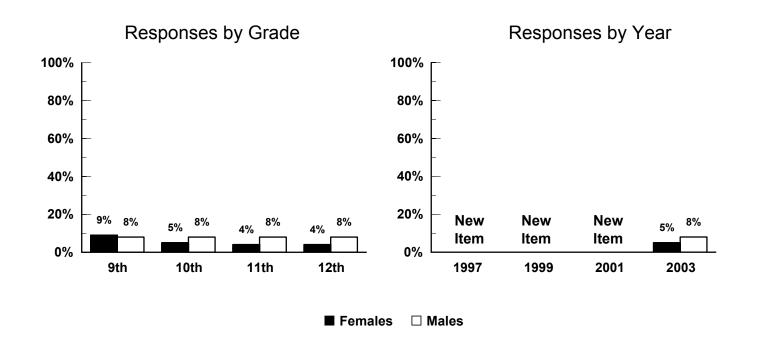


Percentage of respondents who had at least one drink of alcohol on school property on one or more of the past 30 days = 5%



Question 50

Percentage of respondents whose doctor or nurse discussed ways to avoid alcohol use the last time they saw them = 7%



Alcohol and Other Drug Use

Questions:

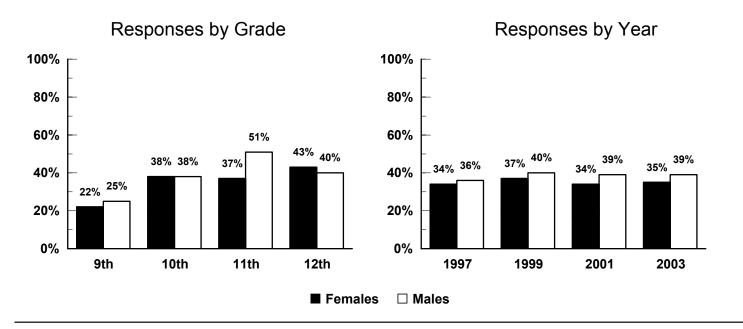
- **51.** During your life, how many times have you used marijuana?
- **52.** How old were you when you tried marijuana for the first time?
- **53.** During the past 30 days, how many times did you use marijuana?
- **54.** During the past 30 days, how many times did you use marijuana on school property?
- **55.** During your life, how many times have you used any form of cocaine, including powder, crack, or freebase?
- **56.** During the past 30 days, how many times did you use any form of cocaine, including powder, crack, or freebase?
- **57.** During your life, how many times have you sniffed glue, or breathed the contents of aerosol spray cans, or inhaled any paints or sprays to get high?
- **58.** During the past 30 days, how many times have you sniffed glue, or breathed the contents of aerosol spray cans, or inhaled any paints or sprays to get high?
- **59.** During your life, how many times have you used heroin (also called smack, junk, or China White)?
- **60.** During your life, how many times have you used methamphetamines (also called speed, crystal, crank, or ice)?
- **61.** During your life, how many times have you used ecstasy (also called MDMA)?
- **62.** During your life, how many times have you taken steroid pills or shots without a doctor=s prescription?
- **63.** During your life, how many times have you used a needle to inject any illegal drug into your body?
- **64.** During the past 12 months, has anyone offered, sold, or given you an illegal drug on school property?

Rationale:

These questions measure lifetime and current use of marijuana, cocaine, and inhalants and lifetime use of heroin, methamphetamines, ecstasy, hallucinogens, steroids, and injected drugs. In addition to morbidity and mortality due to injury, drug use is related to suicide, early unwanted pregnancy, school failure, delinquency, and transmission of sexually transmitted diseases (STD), including human immunodeficiency virus (HIV) infection.²⁷ Despite improvements in recent years, drug use is greater among youth in the United States than has been documented in any other industrialized nation in the world.²⁸ In 2001, 42.4% of high school students had used marijuana in their lifetime and 9.4% of high school students had used some form of cocaine in their lifetime. From 1991 to 2001, the percentage of high school students who used cocaine in the past month increased from 1.7% to 4.2%.¹

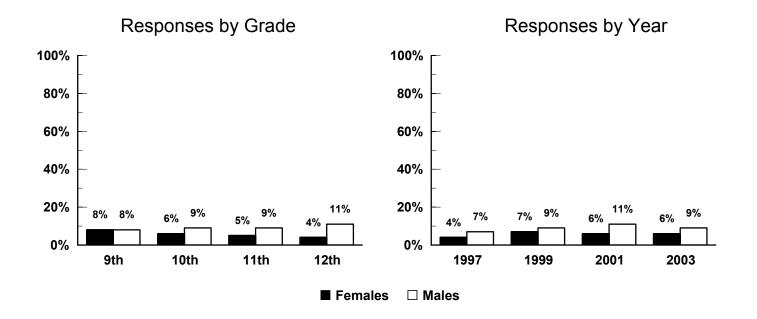
Results: The results for Questions 51 - 64 are summarized on pages 45 - 51.

Percentage of respondents who used marijuana one or more times during their life = 37%

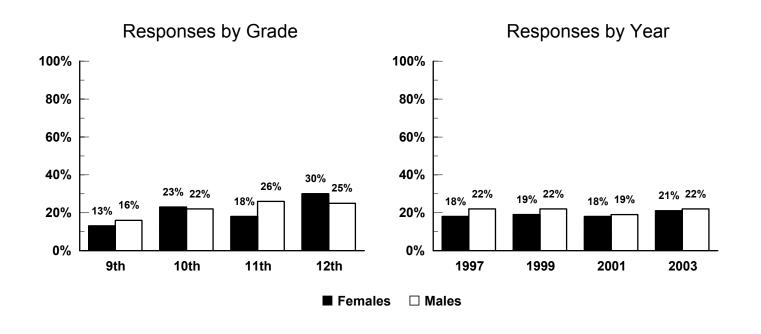


Question 52

Percentage of respondents who tried marijuana for the first time prior to age 13 = 8%

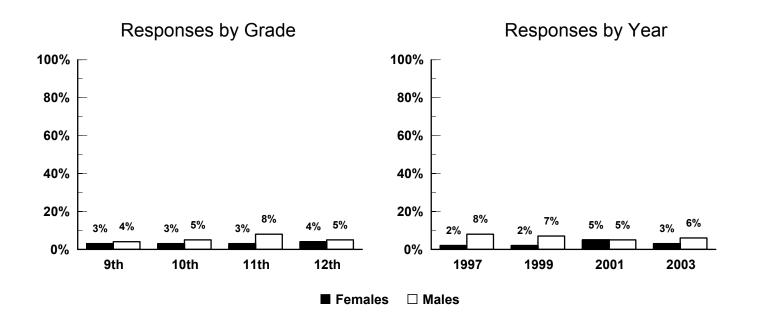


Percentage of respondents who used marijuana one or more times during the past 30 days = 21%

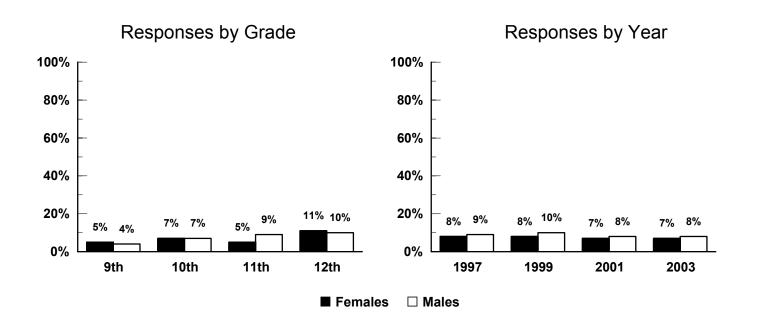


Question 54

Percentage of respondents who used marijuana on school property one or more times during the past 30 days = 4%

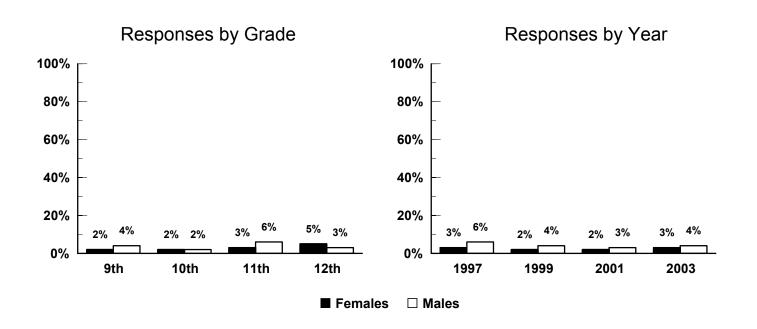


Percentage of respondents who used any form of cocaine, including powder, crack, or freebase, one or more times during their life = 7%

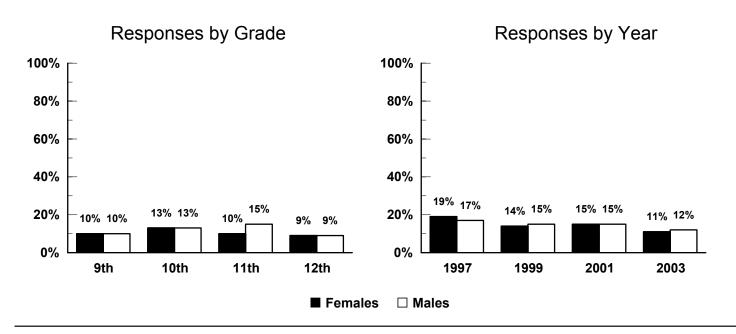


Question 56

Percentage of respondents who had used any form of cocaine including powder, crack, or freebase, one or more times during the past 30 days = 4%

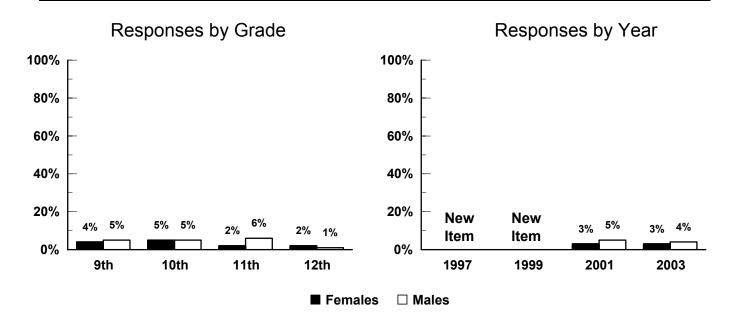


Percentage of respondents who had sniffed glue, breathed the contents of aerosol spray cans, or inhaled any sprays or paints to get high during their life = 11%

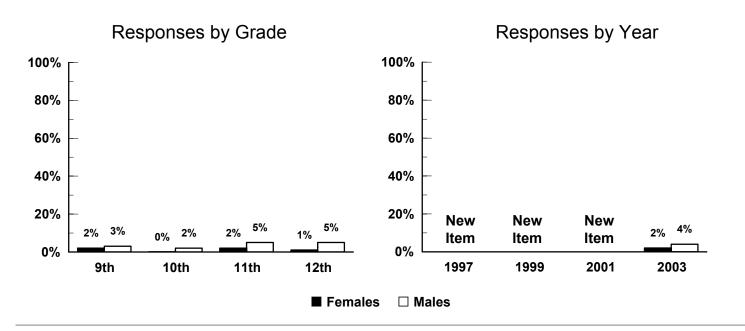


Question 58

Percentage of respondents who had sniffed glue, breathed the contents of aerosol spray cans, or inhaled any sprays or paints to get high during the past 30 days = 4%

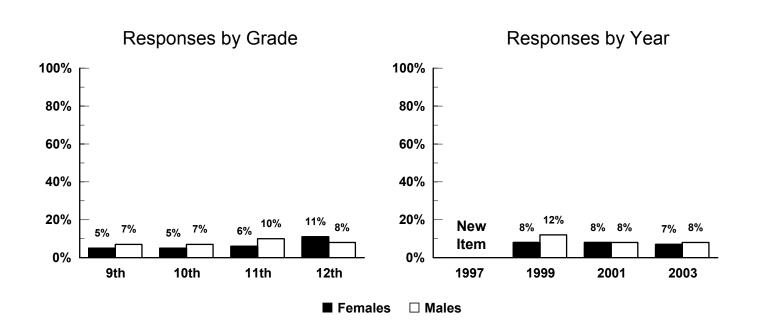


Percentage of respondents who used heroin one or more times during their life = 3%

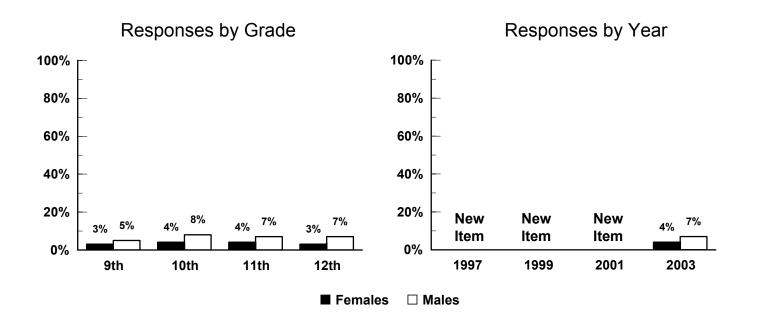


Question 60

Percentage of respondents who used methamphetamines one or more times during their life = 7%

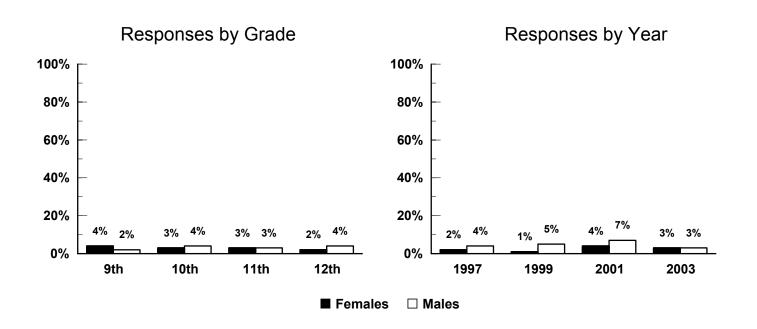


Percentage of respondents who used ecstasy one or more times during their life = 5%

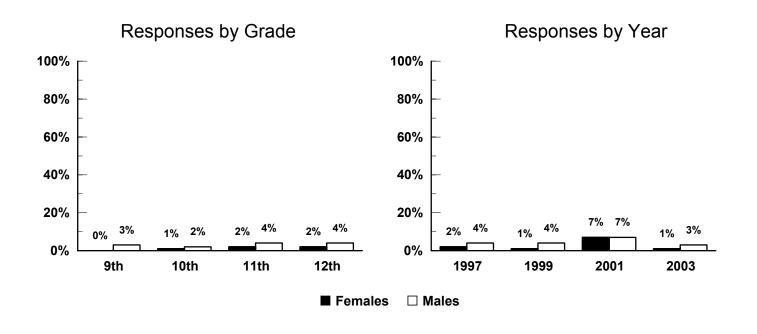


Question 62

Percentage of respondents who had taken steroid pills or shots without a doctor's prescription, one or more times during their life = 3%

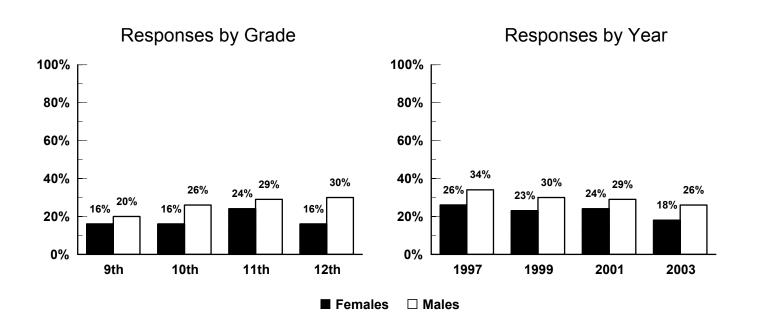


Percentage of respondents who ever used a needle to inject any illegal drug into their body one or more times during their life = 2%



Question 64

Percentage of respondents who have had someone offer, sell, or give them an illegal drug on school property during the past 12 months = 22%



Sexual Behaviors that Result in HIV Infection, Other Sexually Transmitted Diseases, and Unintended Pregnancies

Questions:

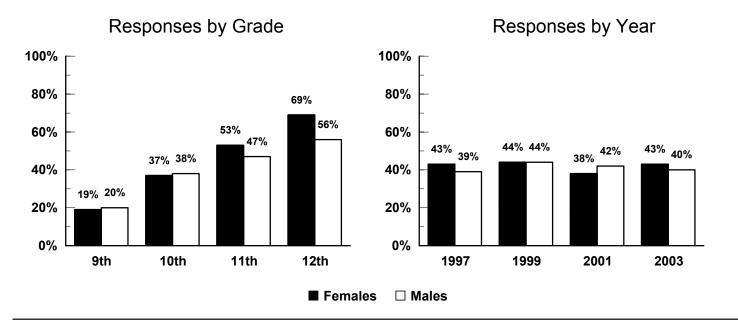
- **65.** Have you ever had sexual intercourse?
- **66.** How old were you when you had sexual intercourse for the first time?
- **67.** During your life, with how many people have you had sexual intercourse?
- **68.** During the past 3 months, with how many people did you have sexual intercourse?
- **69.** Did you drink alcohol or use drugs before you had sexual intercourse the last time?
- **70.** The last time you had sexual intercourse, did you or your partner use a condom?
- 98. Have you ever been taught about AIDS or HIV infection in school?

Rationale:

These questions measure the prevalence of sexual activity, number of sexual partners, age at first intercourse, alcohol and other drug use related to sexual activity, condom use, and whether high school students have received HIV prevention education. Age at first intercourse and number of sexual partners are associated with increased risk for unwanted pregnancy and other sexually transmitted diseases, including HIV infection. Gonorrhea rates are highest among females between the ages of 15 and 19 (715.8 cases per 100,000 females) and males between the ages of 20 and 24 (589.7 cases per 100,000 males). Between 1990 and 1995, AIDS incidence among people aged 13 to 25 years rose nearly 20%. In 2000, 1,688 young people (aged 13 to 24) were reported with AIDS, bringing the cumulative total to 31,293 cases of AIDS in this age group. The percentage of high school students who ever had sexual intercourse decreased from 54.1% in 1991 to 45.6% in 2001, while condom use among currently sexually active students increased from 46.2% in 1991 to 58.0% in 1999 and then leveled off in 2001 (57.9%). The prevalence of multiple sex partners decreased by 24% from 18.7% to 14.2% from 1991 to 2001. In 2000, 86% of high schools required HIV prevention education.

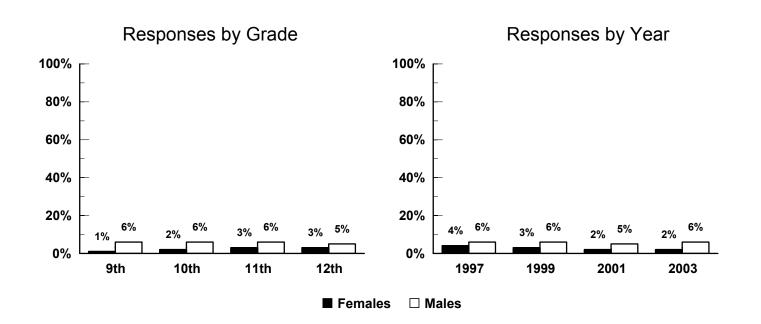
Results: The results for Questions 65 - 70, and 98 are summarized on pages 53 - 56.

Percentage of respondents who ever had sexual intercourse = 42%

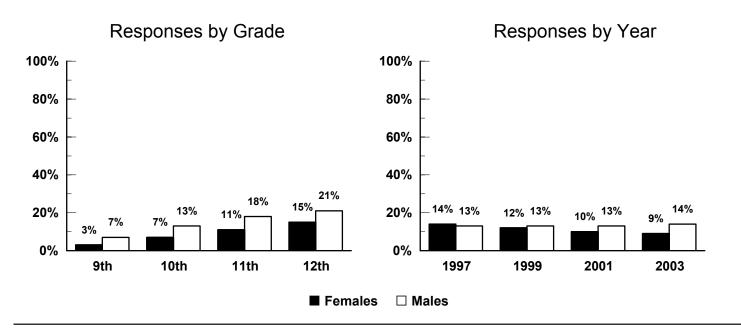


Question 66

Percentage of respondents who had sexual intercourse for the first time prior to age 13 = 4%

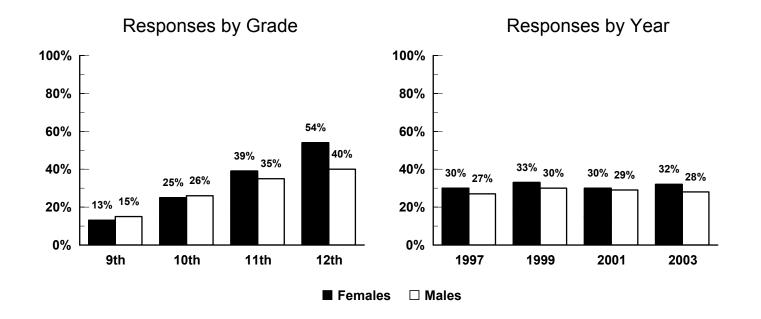


Percentage of respondents who had sexual intercourse with four or more people during their life = 12%

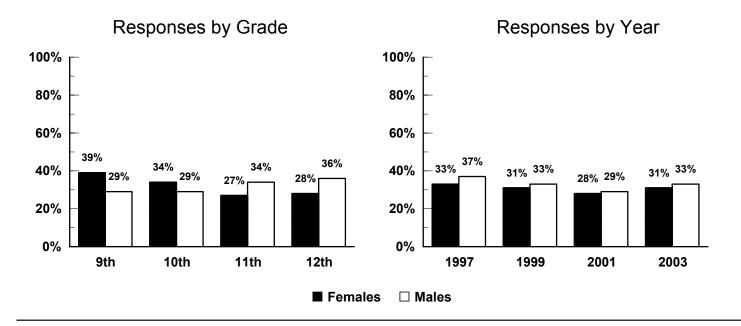


Question 68

Percentage of respondents who had sexual intercourse with one or more people during the past 3 months = 30%

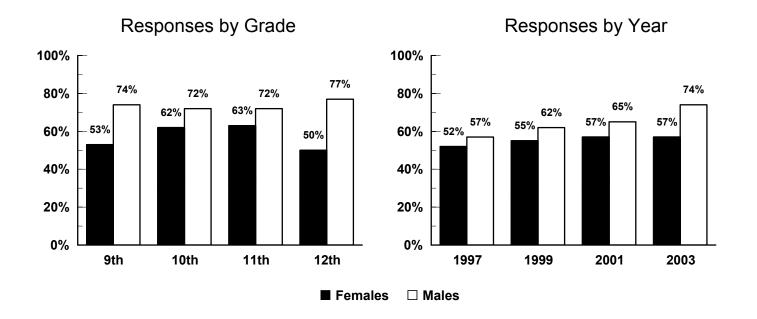


Of respondents who had sexual intercourse, the percentage who drank alcohol or used drugs before last sexual intercourse = 32%



Question 70

Of respondents who had sexual intercourse, the percentage who used or whose partner used a condom during last sexual intercourse = 65%



Percentage of respondents who had been taught about AIDS/HIV infection in school = 88%



Sexual Behaviors that Result in HIV Infection, Other Sexually Transmitted Diseases, and Unintended Pregnancies

Questions:

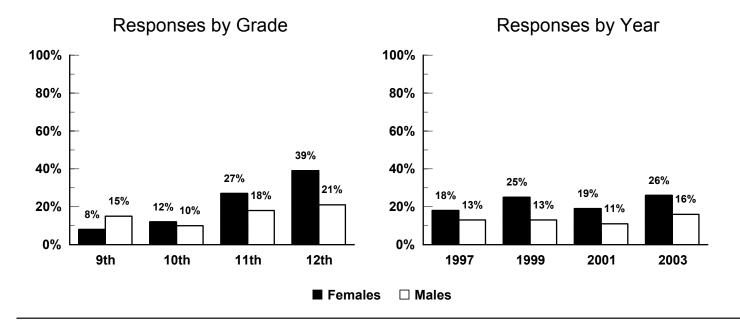
- **71.** The last time you had sexual intercourse, what one method did you or your partner use to prevent pregnancy?
- **72.** How many times have you been pregnant or gotten someone pregnant?
- **73.** The last time you saw a doctor or nurse, did they discuss ways to prevent pregnancy, AIDS, or other sexually transmitted diseases (STDs)?

Rationale:

These questions measure use of contraception and whether a student has been pregnant or gotten someone pregnant. In 1997, 840,000 females aged 15-19 years old became pregnant.³² In 2000, among females aged 15-19, the birth rate was 48.5 per 1,000 and nearly 469,000 gave birth.³³ Sixty-six percent of all births among teenagers are the result of unintended pregnancy.³⁴ Among females aged 15-19 years, pregnancy rates decreased 19% from 116.5 per 1,000 in 1991 to 94.3 per 1,000 in 1997,³⁵ and birth rates decreased 26% from 62.1 per 1,000 in 1991 to 45.9 per 1,000 in 2001.³⁶ In 2001, 18.2% of currently sexually active high school students used birth control pills at last sexual intercourse.¹

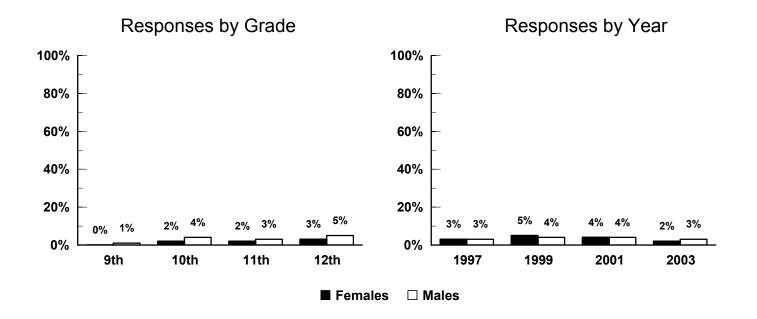
Results: The results for Questions 71 - 73 are summarized on pages 58 and 59.

Of respondents who had sexual intercourse, the percentage who used or whose partner used birth control pills to prevent pregnancy during last sexual intercourse = 21%

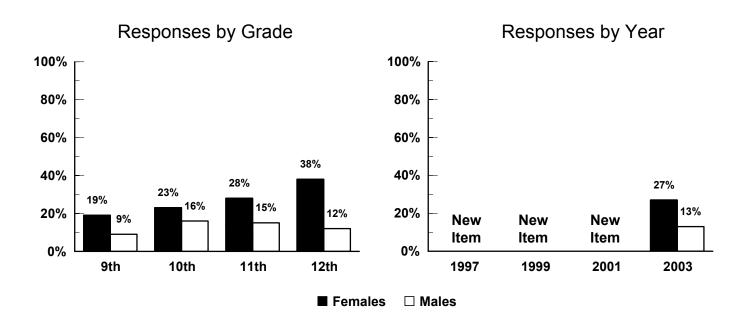


Question 72

Percentage of respondents who have been pregnant or gotten someone pregnant one or more times = 3%



Percentage of respondents whose doctor or nurse discussed ways to prevent pregnancy, AIDS, or other sexually transmitted diseases (STDs) the last time they saw them = 20%



Dietary Behaviors

Questions:

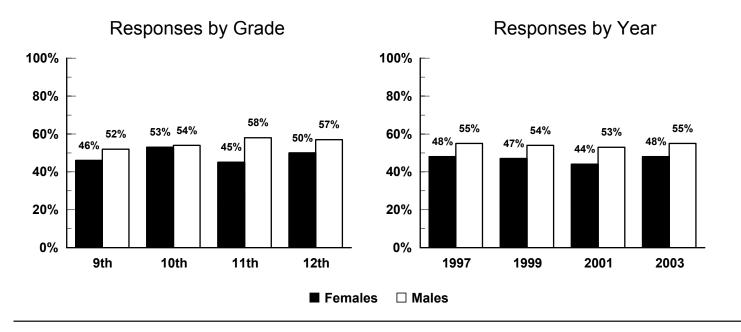
- **6.** How tall are you without your shoes on?
- 7. How much do you weigh without your shoes on?
- 74. How do you describe your weight?
- **75.** Which of the following are you trying to do about your weight?
- **76.** During the past 30 days, did you exercise to lose weight or to keep from gaining weight?
- **77.** During the past 30 days, did you eat less food, fewer calories, or foods low in fat to lose weight or to keep from gaining weight?
- **78.** During the past 30 days, did you go without eating for 24 hours or more (also called fasting) to lose weight or to keep from gaining weight?
- **79.** During the past 30 days, did you take any diet pills, powders, or liquids without a doctor=s advice to lose weight or to keep from gaining weight? (Do not include meal replacement products such as Slim Fast.)
- **80.** During the past 30 days, did you vomit or take laxatives to lose weight or to keep from gaining weight?

Rationale:

These questions measure self-reported height and weight, self-perception of body weight status, and specific weight control behaviors. Data on self-reported height and weight can be used to calculate body mass index and provide a proxy measure of whether high school students are overweight. Although overweight prevalence estimates derived from selfreported data are likely to be low, ^{37,38} they can be useful in tracking trends over time. Prevalence trends from national surveys of adults using self-reported height and weight have been consistent with trend data from national surveys using measured heights and weights.³⁹ Overweight and obesity are increasing in both genders and among all population groups. In 1999, an estimated 61% of United States adults and 14% of adolescents aged 12-19 years were overweight. In 1999, there were nearly twice as many overweight children and almost three times as many overweight adolescents as there were in 1980.⁴⁰ 300,000 deaths a year in the United States are currently associated with overweight and obesity. Left unabated, overweight and obesity may soon cause as much preventable disease and death as cigarette smoking. 41 Overweight or obesity acquired during childhood or adolescence may persist into adulthood and increase the risk later in life for coronary heart disease, gallbladder disease, some types of cancer, and osteoarthritis of the weight-bearing joints.⁴² In adolescence, obesity is associated with hyperlipidemia, hypertension, abnormal glucose tolerance, and adverse psychological and social consequences. 43 Studies have shown high rates of body dissatisfaction and dieting among adolescent females, with many engaging in unhealthy weight control behaviors, such as fasting and self-induced vomiting which can lead to abnormal physical and psychological development. 44-48

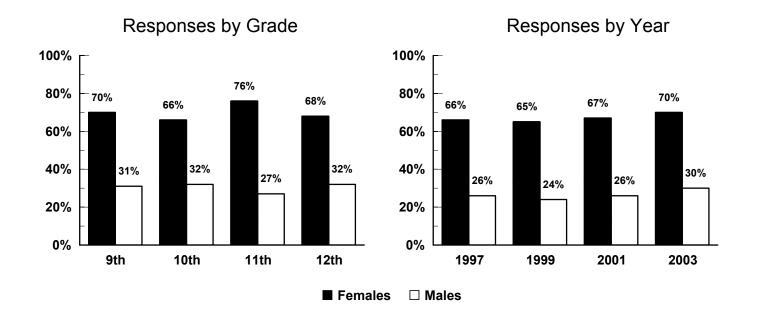
Results: The results for Questions 74 - 80 are summarized on pages 61 - 64. Also, on page 65 the results of Questions 6 and 7 are used to show the percentage of students who are overweight, and the percentage of students who are at risk for becoming overweight.

Percentage of respondents who think of themselves as about the right weight = 52%

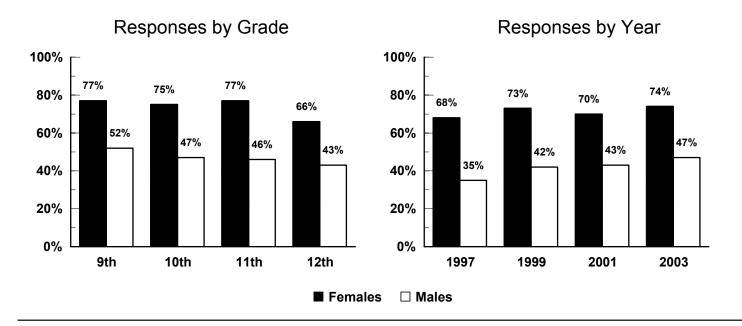


Question 75

Percentage of respondents who are trying to lose weight = 50%

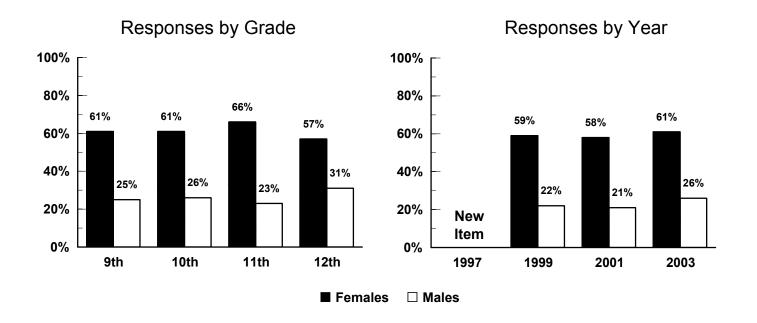


Percentage of respondents who exercised to lose weight or to keep from gaining weight during the past 30 days = 60%

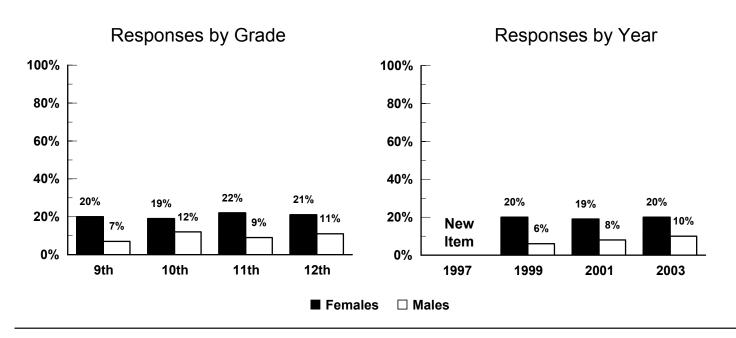


Question 77

Percentage of respondents who ate less food, fewer calories, or foods low in fat to lose weight or to keep from gaining weight during the past 30 days = 43%



Percentage of respondents who went without eating for 24 hours or more to lose weight or to keep from gaining weight during the past 30 days = 15%

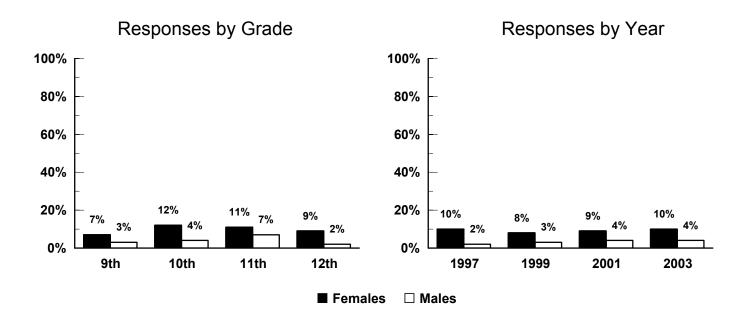


Question 79

Percentage of respondents who took diet pills, powders, or liquids without a doctor's advice to lose weight or to keep from gaining weight during the past 30 days = 8%

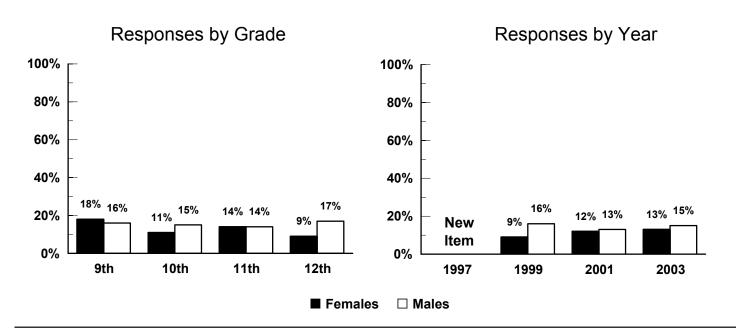


Percentage of respondents who vomited or took laxatives to lose weight or to keep from gaining weight during the past 30 days = 7%



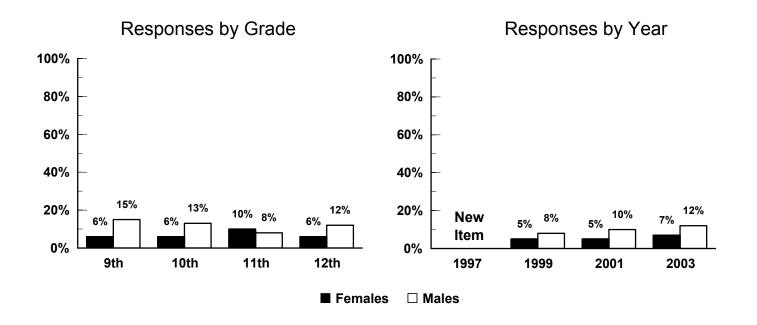
Questions 6 and 7

Percentage of respondents who are at risk for becoming overweight = 14%



Questions 6 and 7

Percentage of respondents who are overweight = 9%



Dietary Behaviors

Questions:

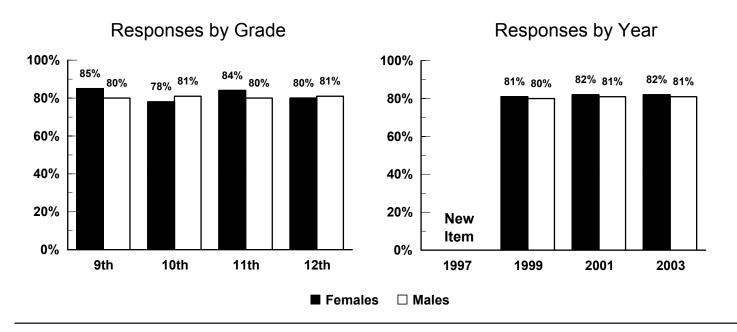
- **81.** During the past 7 days, how many times did you drink 100% fruit juices such as orange juice, apple juice, or grape juice? (Do not count punch, Kool-Aid, sports drinks, or other fruit-flavored drinks.)
- **82.** During the past 7 days, how many times did you eat fruit? (Do not count fruit juice.)
- **83.** During the past 7 days, how many times did you eat green salad?
- **84.** During the past 7 days, how many times did you eat potatoes? (Do not count french fries, fried potatoes, or potato chips.)
- **85.** During the past 7 days, how many times did you eat carrots?
- **86.** During the past 7 days, how many times did you eat other vegetables? (Do not count green salad, potatoes, or carrots.)
- 87. During the past 7 days, how many glasses of milk did you drink? (Include the milk you drank in a glass or cup, from a carton, or with cereal. Count the half pint of milk served at school as equal to one glass.)
- **88.** During the past 7 days, how many times did you eat breakfast?
- **89.** When was the last time you saw a dentist for a check-up, exam, teeth cleaning, or other dental work?

Rationale:

These questions measure food choices. Six of the questions address fruit and vegetable consumption, and one addresses milk consumption. The fruit and vegetable questions are similar to questions asked of adults on CDC's Behavioral Risk Factor Survey. Fruits and vegetables are good sources of complex carbohydrates, vitamins, minerals, and other substances that are important for good health. Dietary patterns with higher intakes of fruits and vegetables are associated with a decreased risk for some types of cancer. In 2001, only 23.3% of male high school students and 19.7% of female high school students met the minimum average daily goal of at least five servings per day of vegetables and fruits. Milk is by far the largest single source of calcium for high school students. About half of male high school students and more than 80% of female high school students do not meet dietary recommendations for calcium intake. Calcium is essential for the formation and maintenance of healthy bones and teeth. Low calcium intake during the first two to three decades of life is an important risk factor in the development of osteoporosis.

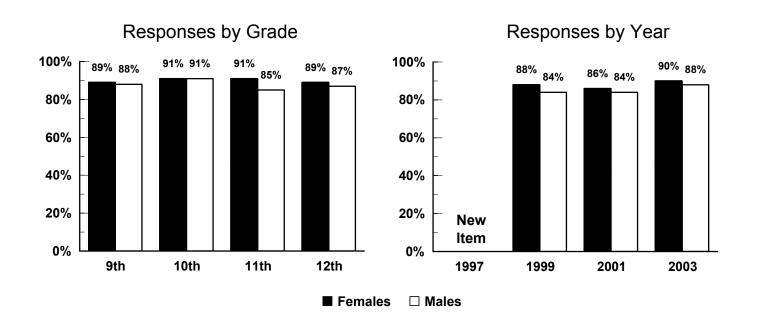
Results: The results for Questions 81 - 89 are summarized on pages 67 - 71. Also, on page 71 the results of Questions 81 - 86 are used to show the percentage of students who ate five or more servings of fruits and vegetables per day during the past seven days.

Percentage of respondents who drank 100% fruit juice one or more times during the past seven days = 81%

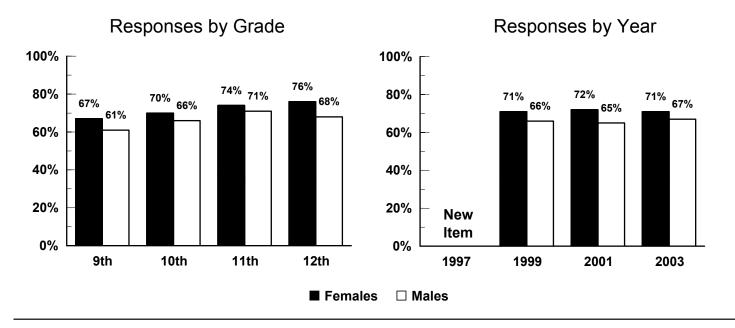


Question 82

Percentage of respondents who ate fruit one or more times during the past seven days = 89%

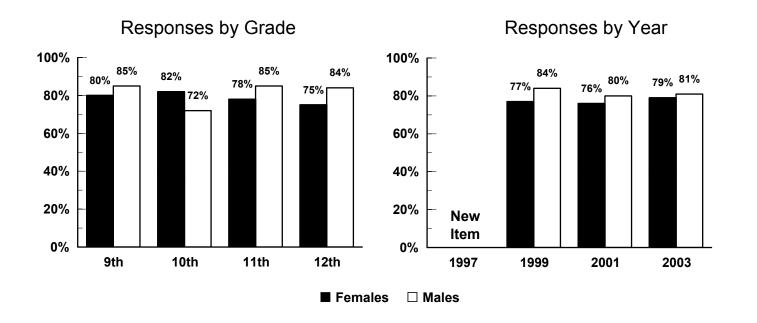


Percentage of respondents who ate green salad one or more times during the past seven days = 69%

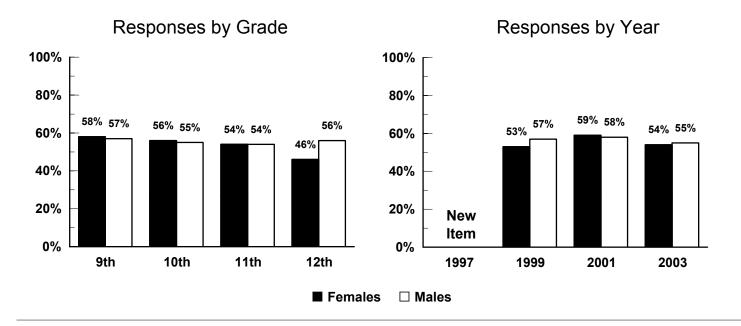


Question 84

Percentage of respondents who ate potatoes one or more times during the past seven days = 80%

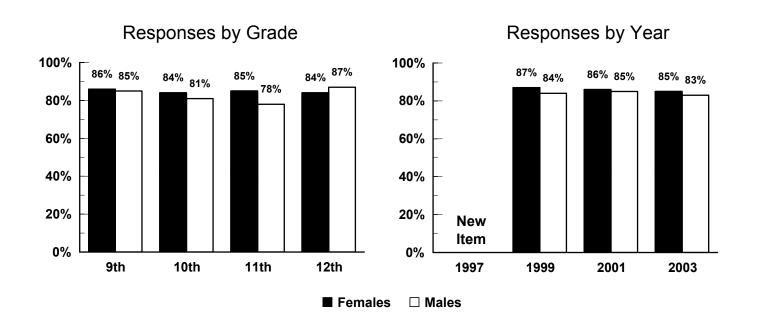


Percentage of respondents who ate carrots one or more times during the past seven days = 54%

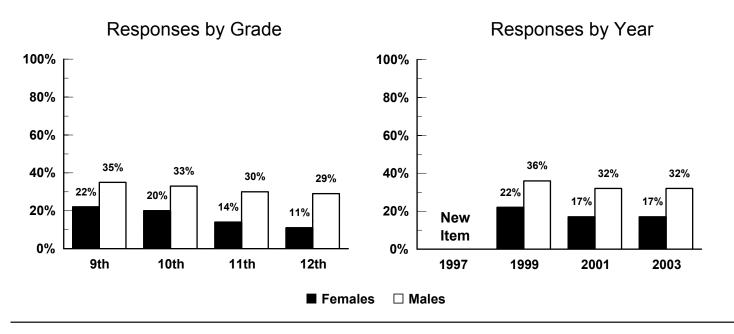


Question 86

Percentage of respondents who ate other vegetables one or more times during the past seven days = 84%

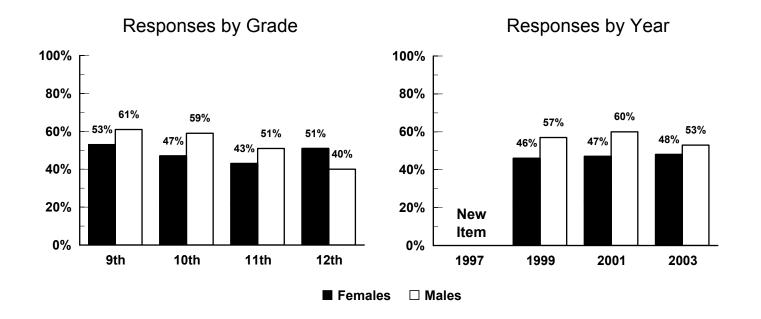


Percentage of respondents who drank three or more glasses of milk per day during the past seven days = 24%

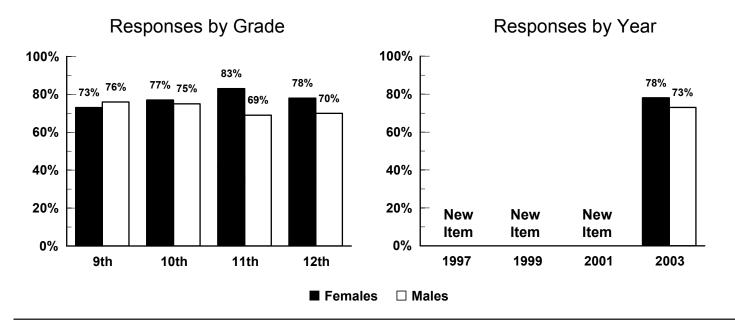


Question 88

Percentage of respondents who ate breakfast four or more times during the past seven days = 51%

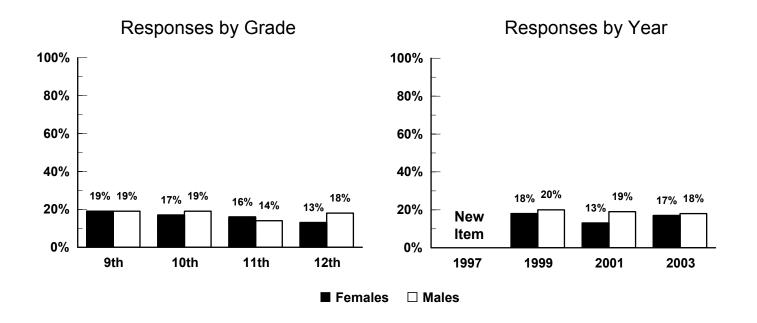


Percentage of respondents who saw a dentist during the past 12 months for a check-up, exam, teeth cleaning, or other dental work = 75%



Questions 81 - 86

Percentage of respondents who ate five or more servings of fruits and vegetables per day during the past 7 days = 17%



Physical Activity

Questions:

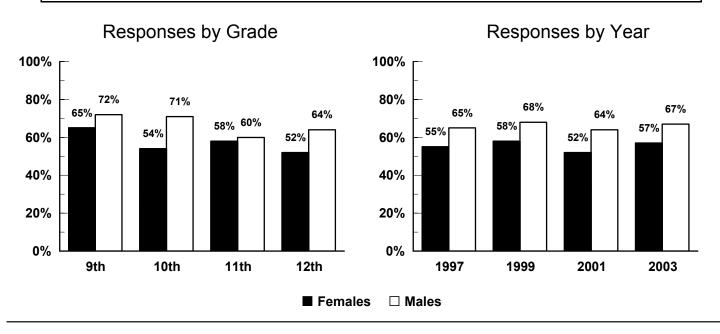
- **90.** On how many of the past 7 days did you exercise or participate in physical activity for at least 20 minutes that made you sweat and breathe hard, such as basketball, soccer, running, swimming laps, fast bicycling, fast dancing, or similar aerobic activity?
- **91.** On how many of the past 7 days did you participate in physical activity for at least 30 minutes that did not make you sweat or breathe hard, such as fast walking, slow bicycling, skating, pushing a lawn mower, or mopping floors?
- **92.** On how many of the past 7 days did you exercise to strengthen or tone your muscles, such as push-ups, sit-ups, or weight lifting?
- **93.** On an average school day, how many hours do you watch TV?
- **94.** In an average week when you are in school, on how many days do you go to physical education (PE) classes?
- **95.** During an average physical education (PE) class, how many minutes do you spend actually exercising or playing sports?
- **96.** During the past 12 months, on how many sports teams did you play? (Include any teams run by your school or community groups.)
- **97.** On an average school day, how many hours do you play video games or use a computer for fun? (Include activities such as Nintendo, Game Boy, Play Station, and computer games.)

Rationale:

These questions measure participation in physical activity, physical education classes, sports teams, and television watching. Participating in regular physical activity helps build and maintain healthy bones and muscles, control weight, build lean muscle, and reduce fat; reduces feelings of depression and anxiety; and promotes psychological well-being.⁵⁸ Over time, regular physical activity decreases the risk of dying prematurely, dying of heart disease, and developing diabetes, colon cancer, and high blood pressure.⁵⁸ Decreases in vigorous physical activity occur during grades 9-12, particularly for girls; by 11th grade, half of female high school students do not participate in sufficient levels of vigorous physical activity.¹ School physical education classes can increase adolescent participation in moderate to vigorous physical activity^{59,60} and help high school students develop the knowledge, attitudes, and skills they need to engage in lifelong physical activity. 61 The percentage of high school students enrolled in daily physical education class decreased from 1991-1995 (from 41.6% to 25.4%) and increased from 1995-2001 (from 25.4% to 32.2%), but still remained far below the 1991 level. Television viewing is the principal sedentary leisure time behavior in the United States and television viewing in young people is related to obesity. 62,63

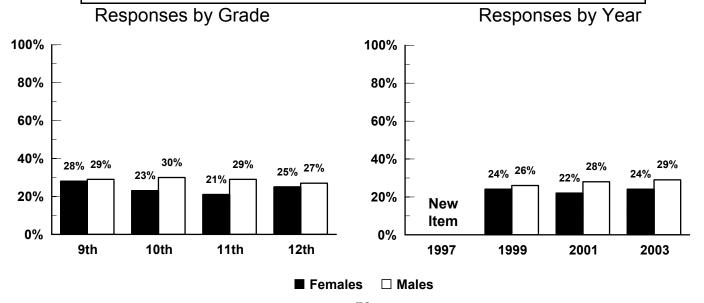
Results: The results for Questions 90 - 97 are summarized on pages 73 - 76. On page 77 the results of Questions 90 and 91 are used to show the percentage of students who did not participate in at least 20 minutes of vigorous physical activity on three or more of the past seven days and did not do at least 30 minutes of moderate physical activity on five or more of the past seven days. Also on page 77, the results of Questions 90 and 91 are used to show the percentage of students who participated in no vigorous or moderate physical activity during the past seven days.

Percentage of respondents who exercised or participated in physical activities for at least 20 minutes that made them sweat and breathe hard such as basketball, soccer, running, swimming laps, fast bicycling, fast dancing, or similar aerobic activities during 3 or more of the past 7 days = 62%

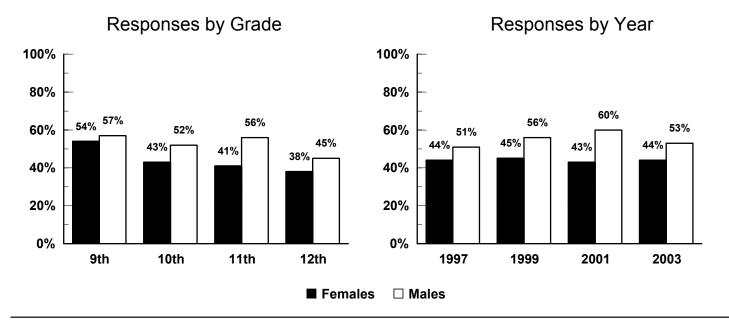


Question 91

Percentage of respondents who participated in physical activities for at least 30 minutes that did not make them sweat and breathe hard, such as fast walking, slow bicycling, skating, pushing a lawn mower, or mopping floors during 5 or more of the past 7 days = 26%



Percentage of respondents who did exercises to strengthen or tone their muscles, such as push-ups, sit-ups, or weight lifting, during 3 or more of the past 7 days = 49%

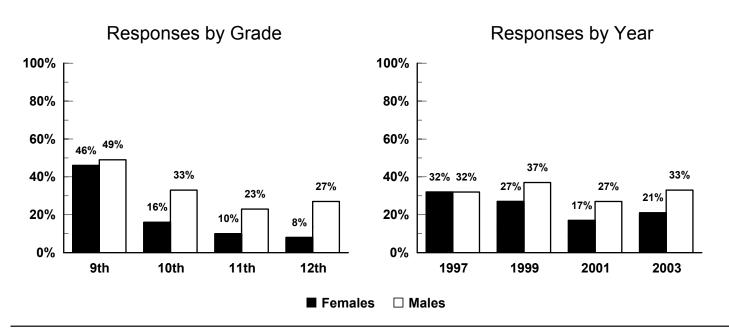


Question 93

Percentage of respondents who during an average school day watched TV for 3 or more hours per day = 28%

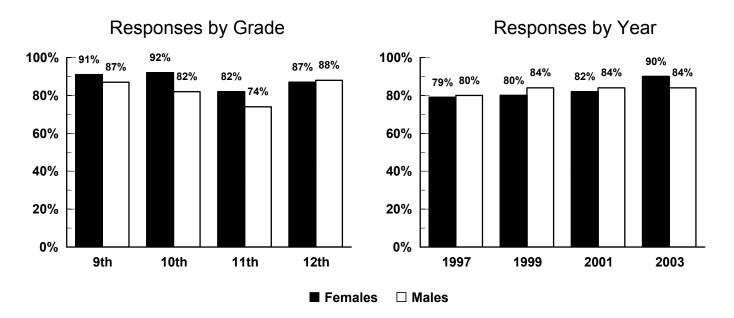


Percentage of respondents who went to physical education class one or more days in an average school week = 27%

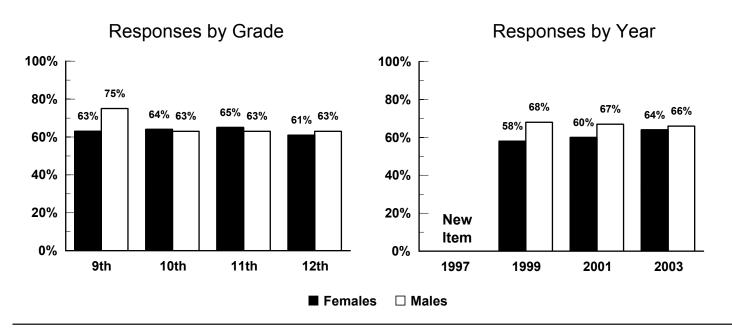


Question 95

Of respondents enrolled in physical education class, the percentage who exercised or played sports more than 20 minutes during an average physical education class = 86%

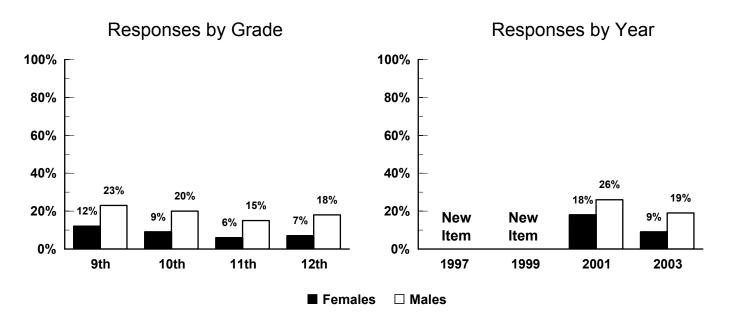


Percentage of respondents who played on one or more sports teams during the past 12 months = 65%



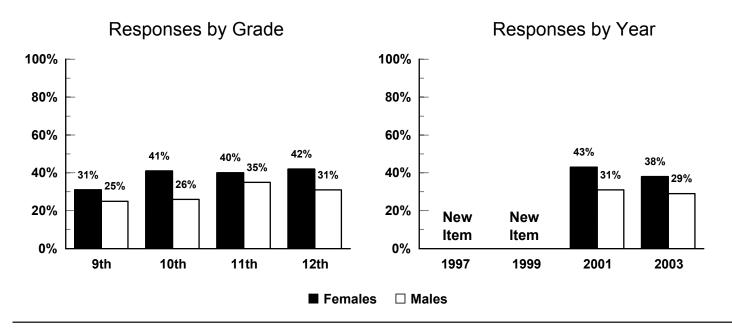
Question 97

Percentage of respondents who played video games or used a computer for fun 3 or more hours on an average school day = 14%



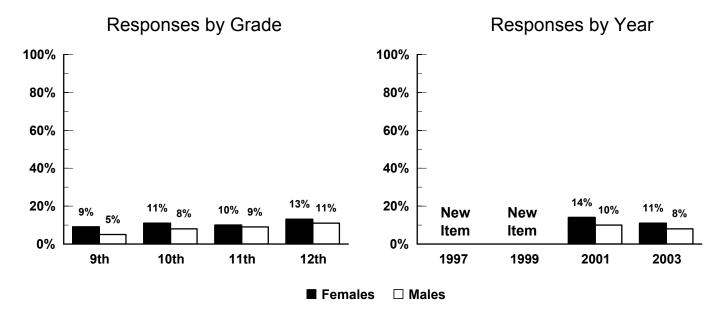
Questions 90 and 91

Percentage of respondents who did not participate in at least 20 minutes of vigorous physical activity on 3 or more of the past 7 days and did not do at least 30 minutes of moderate physical activity on 5 of the past 7 days = 34%



Questions 90 and 91

Percentage of respondents who participated in no vigorous or moderate physical activity during the past 7 days = 9%



References

- 1. Centers for Disease Control and Prevention. Youth Risk Behavior Surveillance United States, 2001. Morbidity and Mortality Weekly Report 51:SS-4, 2002.
- 2. Centers for Disease Control and Prevention. Injury-control recommendations: Bicycle helmets. Morbidity and Mortality Weekly Report 44:1-17, 1995.
- 3. Sosin DM, Sacks JJ, Webb KW. Pediatric head injuries and deaths from bicycling in the United States. <u>Pediatrics</u> 98:868-870, 1996.
- 4. Rivara FP. Traumatic deaths of children in the United States: currently available prevention strategies. <u>Pediatrics</u> 75:456–62, 1985.
- 5. Thompson RS, Rivara FP, Thompson DC. A case-control study of the effectiveness of bicycle safety helmets. New England Journal of Medicine 320:1361–7, 1989.
- 6. Thompson DC, Nunn ME, Thompson RS, Rivara FP. Effectiveness of bicycle safety helmets in preventing serious facial injury. Journal of American Medical Association 276:1974–5, 1996.
- 7. Thompson DC, Rivera FP, Thompson RS. Effectiveness of bicycle safety helmets in preventing head injuries: a case-control study. <u>Journal of American Medical Association</u> 276:1968-73, 1996.
- 8. National Highway Traffic Safety Administration. Benefits of safety belts and motorcycle helmets: report to Congress, February 1996. Washington DC: United States Department of Transportation, 1996.
- 9. Hoyert DL, Arias E, Smith BL, Murphy SL, Kochanek KD. Deaths: Final Data for 1999. <u>National Vital Statistics Reports</u> 49: 1-113, 2001.
- 10. National Highway Traffic Safety Administration. 1998 Youth fatal crash and alcohol facts. Washington, DC: United States Department of Transportation, 1998.
- 11. Centers for Disease Control and Prevention. Alcohol Involvement in Fatal Motor-Vehicle Crashes United States, 1997-1998. Morbidity and Mortality Weekly Report 48(47):1086-7, 1999.
- 12. National Center for Injury Prevention and Control. <u>Injury Fact Book 2001-2002</u>. Atlanta, GA: Centers for Disease Control and Prevention; 2001.
- 13. Anderson RN. Deaths: Leading Causes for 1999. National Vital Statistics Reports 49: 1-88, 2001.
- 14. Rosenberg ML, O'Carroll PW, Powell KE. Let's be clear. Violence is a public health problem. Journal of the American Medical Association 267:3071-3072, 1992.
- 15. Kaufman P, Chen X, Choy SP, Peter K, Ruddy SA, Miller AK, Fleury JK, Chandler KA, Planty MG, Rand MR. <u>Indicators of School Crime and Safety: 2001</u>. United States Departments of Education and Justice. NCES 2002–113/NCJ-190075. Washington, DC: 2001.
- 16. Centers for Disease and Prevention. School Health Programs and Policies Study: A Summary Report. Journal of School Health. 71(7) 249-350, 2001.
- 17. Cotton NU, Resnick J, Browne DC, Martin SL, McCarraher DR, Woods J. Aggression and fighting behavior among African-American adolescents: Individual and family factors. <u>American Journal of Public Health</u> 84:618-622, 1994.

- 18. Davis TC, Peck GQ, Storment JM. Acquaintance rape and the high school student. <u>Journal of Adolescent Health</u> 14:220-224, 1993.
- 19. United States Department of Health and Human Services. <u>Preventing Tobacco Use Among Young People: A Report of the Surgeon General</u>. Washington, DC: United States Government Printing Office, 1994.
- 20. Everett SA, Giovino GA, Warren CW, Crossett L, Kann L. Other substance abuse among high school students who use tobacco. <u>Journal of Adolescent Health</u> 23:289-296, 1998.
- 21. Centers for Disease Control and Prevention. Projected smoking-related deaths among youth United States. Morbidity and Mortality Weekly Report 45(44)971-4, 1996.
- 22. Small MI, Jones SE, Barrios LC, Crossett LS, Dahlberg LL, Albuquerque MS, Sleet DA, Greene BZ, Schmidt ER. School policy and environment: results from the School Health Policies and Programs Study 2000. <u>Journal of School Health</u> 71(7): 325-334, 2001.
- 23. US Department of Health and Human Services. <u>Spit tobacco and youth</u>. US Department of Health and Human Services, Office of Inspector General. Publication No. OEI 06-92-00500, 1992.
- 24. Centers for Disease Control and Prevention. (July 2002) Oral Cancer: Deadly to Ignore. Fact sheet on oral cancer. Available: http://www.cdc.gov/OralHealth/factsheets/ocfacts.html.
- 25. Centers for Disease Control and Prevention. Cigar smoking among teenagers in United States, Massachusetts, and New York, 1996. Morbidity and Mortality Weekly Report 46:433-440, 1997.
- 26. Wechsler H, Dowdall GW, Davenport A, Castillo S. Correlates of college student binge drinking. American Journal of Public Health 85:921-926, 1995.
- 27. Substance Abuse and Mental Health Services Administration. (2001). <u>Summary of findings from the 2000 National Household Survey on Drug Abuse</u> (NHSDA) Series: H-13, DHHS Publication No. SMA 01-3549. Rockville, MD, 2001.
- 28. Blanken AJ. Measuring use of alcohol and other drugs among adolescents. <u>Public Health Reports</u> 108:25-30, 1993.
- 29. Abma JC, Sonenstein FL. Sexual activity and contraceptive practices among teenagers in the United States, 1988 and 1995. National Center for Health Statistics. <u>Vital Health Statistics Series</u> 23:1-26, 2001.
- 30. Centers for Disease Control and Prevention. (August 2002). Tracking the Hidden Epidemics, Trends in STDs in the United States, 2000. [On-line]. Available: http://www.cdc.gov/nchstp/dstd//stats_Trends/Trends2000.pdf.
- 31. Centers for Disease Control and Prevention. (August 2002).HIV/AIDS Surveillance in Adolescents: L265 Slide Series. [On-line]. Available: http://www.cdc.gov/hiv/graphics/adolesnt.html.
- 32. Centers for Disease Control and Prevention. National and state-specific pregnancy rates among adolescents United States, 1995-1997. Morbidity and Mortality Weekly Report 49:605-611,2000.
- 33. Martin JA, Hamilton BE, Ventura SJ, Menacker F, Park MM. Births: Final Data for 2000. <u>National Vital Statistics Reports</u> 50:1-101, 2002.

- 34. National Center for Health Statistics. Fertility, family planning, and women's health: New data from the 1995 National Survey of Family Growth. <u>Vital and Health Statistics Series</u> 23:19, 1997.
- 35. Ventura SJ, Mosher WD, Curtin SA, Abma JC. Trends in pregnancy rates for the United States, 1976-97: an update. <u>National Vital Statistics Report</u> 49(4):1-12, 2001.
- 36. Martin JA, Park MM, Sutton PD. Births: preliminary data for 2001. <u>National Vital Statistics Report</u> 50(10):1-20, 2002.
- Brener ND, McManus T, Galuska DA, Lowry R, Wechsler H. Reliability and Validity of Self-Reported Height and Weight Among High School Students. <u>Journal of Adolescent Health</u>, in press.
- 38. Goodman E, Hinden BR, Khandelwal S. Accuracy of teen and parental reports of obesity and body mass index. <u>Pediatrics</u> 106:52-8, 2000.
- 39. Galuska DA, Serdula M, Pamuk E, Siegel PZ, Byers T. Trends in overweight among US adults from 1987 to 1993: a multistate telephone survey. <u>American Journal of Public Health</u> 86:1729-1735,1996.
- 40. NCHS, CDC.(August 2002) Prevalence of overweight and obesity among adults: United States, 1999 [On-line]. Available:www.cdc.gov/nchs/products/pubs/pubd/hestats/obese/obse99.html.
- 41. United States Department of Health and Human Services. <u>The Surgeon General's call to action to prevent and decrease overweight and obesity</u>. Rockville, MD: United States Department of Health and Human Services, Public Health Service, Office of the Surgeon General; 2001.
- 42. Public Health Service. <u>The Surgeon General's Report on Nutrition and Health</u>. Washington, DC: US Department of Health and Human Services, Public Health Service, 1988. DHHS publication no. (PHS) 88-50210.
- 43. Dietz WH. Health consequences of obesity in youth: childhood predictors of adult disease. Pediatrics 101:518-525, 1998.
- 44. French SA, Jeffery RW. Consequences of dieting to lose weight: effects on physical and mental health. <u>Health Psychology</u> 13:195-212, 1994.
- 45. Serdula MK, Collins ME, Williamson DF, Anda RF, Pamuk ER, Byers TE. Weight control practices of US adolescents. Annals of Behavioral Medicine 119:667-671, 1993.
- 46. Story M, French SA, Resnick MD, Blum RW. Ethnic and socioeconomic status differences in dieting behaviors and body image perceptions in adolescents. <u>International Journal of Eating Disorders</u> 18:173-179, 1995.
- 47. Whitaker A, Davies M, Shaffer D, Johnson J, Abrams S, Walsh BT, Kalikow K. The struggle to be thin: a survey of anorexic and bulimic symptoms in a non-referred adolescent population. Psychological Medicine 19:143-163, 1989.
- 48. Neumark-Sztainer D, Story M, Hannan PJ, Perry CL, Irving LM. Weight-related concerns and behaviors among overweight and nonoverweight adolescents: implications for preventing weight-related disorders. <u>Archives of Pediatrics and Adolescent Medicine</u>156(2):1-21, 2002.
- 49. Serdula MK, Byers T, Mokdad AH, Simoes E, Mendlein JM, Coates RJ. The association between fruit and vegetable intake and chronic disease risk factors. <u>Epidemiology</u> 7:161-165, 1996.

- 50. Van Duyn MA, Pivonka E. Overview of the health benefits of fruit and vegetable consumption for the dietetics professional: selected literature. <u>Journal of American Dietitians Association</u>. 100(12):1511-21, 2000.
- 51. Ness AR, Powles JW. Fruit and vegetables, and cardiovascular disease: a review. <u>International Journal of Epidemiology</u>. 26(1):1-13, 1997.
- 52. Terry P, Terry JB, Wolk A. Fruit and vegetable consumption in the prevention of cancer: an update. <u>Journal of Internal Medicine</u>. 250(4):280-90, 2001.
- 53. National Cancer Institute. 5 A Day for Better Health Program. NIH Publication 01-5019, September 2001.
- 54. United States Department of Agriculture, Agricultural Research Service. Unpublished data from the 1989-91 Continuing Survey of Food Intakes by Individuals. February 1998.
- 55. National Center for Health Statistics, Centers for Disease Control and Prevention. Unpublished data from the 1988-94 National Health and Nutrition Examination Survey. May 1998.
- 56. NIH Consensus Development on Optimal Calcium Intake. Optimal calcium intake. <u>Journal of the American Medical Association</u> 272:1942-1948, 1994.
- 57. United States Department of Agriculture, Agricultural Research Service. Unpublished data from the 1994-96 Continuing Survey of Food Intakes by Individuals. February 1998.
- United States Department of Health and Human Services. <u>Physical Activity and Health: A Report of the Surgeon General</u>. Atlanta: Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, 1996.
- 59. McKenzie KL, Nader PR, Strikmiller PK, Yang M, Stone EJ, Perry CL, Taylor WC, Epping JM, Feldman HA, Luepker RV, Kelder SH. School physical education: effect of the Child and Adolescent Trial for Cardiovascular Health. Preventive Medicine 25:423-431, 1996.
- 60. Sallis JF, McKenzie TL, Alcaraz JE, Kolody B, Faucette N, Hovell MF. The effects of a 2-year physical education program (SPARK) on physical activity and fitness in elementary school students. <u>American Journal of Public Health</u> 87:1328-1334, 1997.
- 61. Centers for Disease Control and Prevention. Guidelines for school and community programs to promote lifelong physical activity among young people. Morbidity and Mortality Weekly Report 46(No. RR-6):1-36, 1997.
- 62. Crespo CJ, Smith E, Troian RP, Bartlett SJ, Macera CA, Anderson RE. Television watching, energy intake and obesity in US children. <u>Archives of Pediatric and Adolescent Medicine</u>. 155:360-365, 2001.
- 63. Gortmaker SL, Must A, Sobol AM, Peterson K, Coolditz GA, Dietz WH. Television viewing as a cause of increasing obesity among children in the United States, 1986-1990. <u>Archives of Pediatric and Adolescent Medicine</u>. 150:356-362, 1996.

RESOURCES

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Office of School Enhancement
700 Governors Drive
Pierre, SD 57501-2291
Phone: (605) 773-3261

Fax: (605) 773-3782 http://www.state.sd.us/deca/

Programs

Coordinated School Health (605) 773-3261 http://www.state.sd.us/deca/CSCF/schoolhealth/

Comprehensive School Health (605) 773-6808 http://www.state.sd.us/deca/CSCF/schoolhealth/cshe/

HIV/AIDS Prevention Education (605) 773-6898 http://www.state.sd.us/deca/CSCF/schoolhealth/aids/index.htm

Child and Adult Nutrition Services (605) 773-3413 http://www.state.sd.us/deca/cscf/CANS/

Training

Curriculum Training is offered in a variety of curricula within the scope of Comprehensive School Health Education. Some of the training that is available includes but is not limited to:

Coordinated School Health Approach – the 8 component model

Health Education and Physical Education Standards and Assessment Training

Research-based programs

Special topics may be covered upon request with emphasis on tobacco prevention, nutrition, physical activity, universal precautions and HIV/AIDS and teen pregnancy prevention within the context of comprehensive school health education. For a list of upcoming workshops conferences visit

http://www.state.sd.us/deca/CSCF/schoolhealth/training/

Resources

South Dakota Health Education Standards – Guidelines for Achieving Health Literacy - approved January 2000

http://www.state.sd.us/deca/TA/contentstandards/health/

South Dakota Physical Education Standards – approved January 2000 http://www.state.sd.us/deca/TA/contentstandards/pe

South Dakota Youth Risk Behavior Survey Trend Data 1991-2001 Compares South Dakota and national YRBS results http://www.state.sd.us/deca/CSCF/schoolhealth/aids/yrbs.htm

2002 South Dakota School Health Profile
Assesses status of health education in SD schools
http://www.state.sd.us/deca/CSCF/schoolhealth/ and click on 2002 School Health Education Profile

Centers for Disease Control (CDC) Division of Adolescent School Health Publications http://www.cdc.gov/nccdphp/dash/

South Dakota Schools Walk campaign Encourages school staff, students and parents to walk http://www.state.sd.us/doh/schoolswalk/index.htm

VERB

CDC's youth media campaign to encourage physical activity http://www.verbnow.com/

Action for Healthy Kids

Join forces with education and health leaders to take action for children's nutrition and physical activity

http://www.edcenter.info/AFHK/tools/profiles.php

South Dakota Department of Human Services Division of Alcohol & Drug Abuse East Highway 34 c/o 500 East Capitol Avenue Pierre, SD 57501-5070

Phone: (605) 773-3123 Fax: (605) 773-7076 Prevention Coordinator http://www.state.sd.us/dhs

Regional Prevention Resource Centers (PRCs)

Northeastern Prevention Resource Center 123 19th Street NE Watertown, SD 57201-6030 Phone: (605) 886-0123 hsanepre@dailypost.com

Southeastern Prevention Resource Center 1000 North West Avenue, Suite 300 Sioux Falls, SD 57104 Phone: (605) 335-6474 seprc@midco.net

Western Prevention Resource Center 919 Main Street, Suite 204 PO Box 2813 Rapid City, SD 57709-2813 (605) 342-1593 wprc@rapidnet.com

Northwestern Prevention Resource Center Three Rivers PO Box 447 Lemmon, SD 57638 Phone: (605) 374-3862 cpntrmhcdc@yahoo.com

PRC Training

Trainings and technical assistance are available to schools, parent and community groups. Numerous curriculum trainings are available, for example, Natural Helpers, Life Skills and Bullying Prevention. Please contact your regional PRC for further information/requests.

School-based Prevention Programs

Prairie View Prevention – Eastern SD 822 # 41st St Ste 235 Sioux Falls, SD 57105

Phone : (605) 331-5724 pvps@dtgnet.com Lifeways, Inc. – Western SD 623 Quincy St. Ste 103 Rapid City, SD 57701 Phone: (605) 716-6555

paulalifeways@rushmore.com

South Dakota Department of Health Office of Health Promotion – Office of Family Health – Office of Disease Prevention 615 East 4th Street, Pierre, SD 57501-1700 Phone (605) 773-3737 Fax: (605) 773-5683

http://www.state.sd.us/doh

Programs

Coordinated School Health http://www.state.sd.us/doh/SchoolHealth/CoordSchool.htm

Family Planning/Pregnancy Prevention http://www.state.sd.us/doh/Address/famplan.htm

Nutrition (605) 734-4551 http://www.state.sd.us/doh/Nutrition/index.htm

Child/Adolescent Health (605)773-4129 http://www.state.sd.us/doh/Disease2/index.htm

Diabetes Prevention and Control Program (605) 773-3737 http://www.sddiabetes.net/

Cardiovascular Program (605) 773-2945 http://www.state.sd.us/doh/Disease2/index.htm

Oral Health (605) 773-7150 http://www.state.sd.us/doh/OralHealth/index.htm

Tobacco Control and Prevention http://www.state.sd.us/doh/Tobacco/index.htm

Disease Prevention 1-800-592-1861 http://www.state.sd.us/doh/Disease/index.htm

Resources

Youth Tobacco Survey http://www.state.sd.us/doh/Tobacco/YTS2001.pdf

School Height and Weight Report http://www.state.sd.us/doh/Stats/weight2002.pdf

Vital Statistics http://www.state.sd.us/doh/Stats/index.htm

Behavioral Risk Factor Surveillance http://www.state.sd.us/doh/Stats/index.htm

Motor Vehicle Crash Statistics http://www.sddot.com/pub.asp?mode=list&TypeID=3